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ABSTRACT

One of a series of curriculum materials developed for training Child Development Associates, this set of training materials focuses upon program planning skills. After successfully completing this area of the curriculum, trainees should be able to perform in several ways, including the following: (1) develop awareness of the scope of the 13 functional areas of the Child Development Associate; (2) be acquainted with current theorists and philosophies in early childhood; (3) evaluate the effectiveness of yearly, weekly, daily, and activity plans; (4) utilize physical facilities to meet program goals; (5) select materials and equipment meeting children's developmental levels; (6) design and implement a program for young children that is developmental in nature and directed toward stated goals and objectives; (7) capitalize on "teachable moments" or "incidental" learning situations; (8) use appropriate group management techniques, such as transition activities; (9) assess the program, the teacher, and the children; (10) organize space into specific learning centers; (11) determine the number of learning centers to be available and the time rotation for their implementation; (12) observe and record children's behavior and development; (13) use observation records to inform parents of their child's progress; (14) plan and conduct field trips and; (15) analyze room arrangements and suggest changes to increase space utilization. Other goals for the Child Development Associate are specified, and 10 chapters of discussion and examples are provided as illustration. (Author/DB)

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CHILD DEVELOPMENT ASSOCIATE:

CHILD GROWTH AND DEVELOPMENT

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OSCAR ROSE JUNIOR COLLEGE

2

OKLAHOMA CHILD DEVELOPMENT ASSOCIATE CURRICULUM

CHILD GROWTH AND DEVELOPMENT

Developed By

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TABLE OF CONTENTS

I	INTRODUCTION	1
II	DEFINITION OF TERMS	3
III	EARLY CHILDHOOD EDUCATION BACKGROUND	7
IV	OBSERVATION OF CHILDREN	14
V	NATURE OF CHILD GROWTH AND DEVELOPMENT	26
VI	PRENATAL DEVELOPMENT	34
VII	NEONATE AND INFANCY	42
VIII	PHYSICAL DEVELOPMENT---TODDLERHOOD AND EARLY CHILDHOOD	55
IX	SOCIAL DEVELOPMENT	60
X	EMOTIONAL DEVELOPMENT	74
XI	INTELLECTUAL DEVELOPMENT	98
XII	TEACHER RESOURCES	106
XIII	PORTFOLIO DEVELOPMENT	118

CHAPTER I

INTRODUCTION

RATIONALE

Childrens' heredity, their environments, and their first six years of life are the most important factors for laying the foundations for their future growth and development. Childrens' heredity is set at conception and then the various aspects of their environments take over in determining the direction their growth and development will take.

In studying the growth and development of children, an individual is seeking to understand the multiple factors and principles which affect these children and how these operate on their total development---physically, intellectually, emotionally, and socially. At the same time, the individual is becoming acquainted with the various theories of child development and can select from these the ideas and principles that this individual will use in working with and rearing children.

Throughout the study of this area, the individual will gain an insight into children and attempt to determine how to structure the environment to foster the most positive growth and development of these children toward responsible adulthood.

Accomplishment of the objectives in this area will foster the individual's development of the following competencies as defined by the Child Development Associate Consortium:

Advances physical and intellectual competence

Builds positive self-concept and individual strength

Promotes positive functioning of children and adults in a group

OBJECTIVES

Upon completion of this area the trainee will be able to:

1. Observe children in a variety of situations, then record and analyze their progress in growth and development according to the developmental tasks for each stage.

2. Recognize in each child or case studies of many children some of the basic patterns and principles of development.

3. Describe the major effect of heredity and environment on the growth and development of an individual child through studying many children.

4. Describe and recognize some hereditary factors that are apparent in children in the center.

5. Recognize the particular stage of development in different children.

6. Describe the major stages of pregnancy and childbirth for the woman.

7. Recognize and describe the major stages of growth and development in children in these areas: physical-motor, emotional, intellectual, social.

8. Recognize and describe factors in the environment that have affected the growth and development of children. Explain how these affected the child and what can be done to enable these factors to foster rather than hinder development.

9. Analyze behavior problems of young children and determine the cause of the problem. Propose possible solutions or courses of action for correction and elimination of the problem. Also, suggest ways in which to prevent the problem from recurring.

10. List and describe the effects of nutrition, health, medications, attitude, appearance, and other external factors on prenatal development.

11. Demonstrate how to meet the physical and psychological needs of a child in such areas as nutrition, health, safety, neglect, abuse, formal/informal education, and materials/equipment.

12. Demonstrate the importance of a variety of elements in a child's play to promote optimum development of that child.

13. Evaluate the physical center environment of a child and demonstrate ways to improve it for the benefit of that child.

CHAPTER II

DEFINITIONS OF TERMS

1. Amniotic sac---The "bag of waters" in which the embryo/fetus lives and grows before birth.

2. Apathetic---Having, or showing, little or no feeling or emotion.

3. Autonomy---The state of being independent and self-directing.

4. Behavior model---A significant parent, adult or peer with whom children may associate and whom they admire.

5. Care giver---A person providing care to young children.

6. Child development---The scientific study of the growth and development of young children.

7. Conceive---To cause to begin.

8. Concept---Something conceived in the mind; an idea.

9. Conception---The state of being conceived; the moment of fertilization when pregnancy begins.

10. Conscience---The feeling that a behavior is right or wrong.

11. Creativity---The intellectual capacity that results in the development of new and original relationships, objects, and ideas.

12. Development of initiative---The energy or action that children exert in discovering who they are as they experiment with plans, ideas, and imagination.

13. Embryo---The developing human individual during the time that the various organs and tissues are being differentiated and formed; from the end of the second week (implantation) to the end of the second month.

14. Environment---The surroundings and all the different forces: physical, social, cultural, etc., which shape and influence the development of a child.

15. Eye-hand coordination---The ability to move the hand smoothly and simultaneously in the direction the eye indicates.

16. Fetus---The developing, individual human from the end of the second month until birth.

17. Heredity---The potentials for development which are genetically derived from one's ancestors.

18. Homeostasis---Maintaining a state of physiological equilibrium in the newborn organism. Tension is reduced and balance restored by food, sleep, sucking, and swallowing; through breathing, moving, having baths, and dry diapers.

19. Identification---A child's psychological orientation toward another person.

20. Infancy---The period from one month to one and a half or two years of age.

21. Language development---The process of acquiring spoken words to communicate.

22. Learning theorist---A person who uses the scientific method to investigate learning behaviors and attempts to explain how learning takes place.

23. Malnutrition---The result of the inadequate intake of food.

24. Maturation---The process of becoming mature.

25. Memory---The ability to recall and associate words with an experience.

26. Motor skill---The ability to impart motion by the muscles, both fine and gross, in a coordinated manner.

    a. Fine motor---Pertaining to the movement of the small muscles, i.e., the muscles of the fingers, eyes, etc.

    b. Gross motor---Pertaining to the movement of the large muscles, i.e., arms, head, torso, legs.

27. Natal---Pertaining to birth.

    a. Innate---Inborn

    b. Innate intelligence---Inherited intellectual potential.

    c. Neonatal---The period from birth to one month.

    d. Prenatal---The period from conception to birth.

28. Ovum---The female cell or egg.

29. Peer---Belonging to the same age group in society.

30. Perception---The direct and immediate knowing of the presence of an object or situation through the physical senses.

31. Physical development---Pertaining to the overall growth of the body, such as motor skills, muscle coordination, body size, etc.

32. Placenta---The structure in the uterus through which the embryo and fetus receive nourishment.

33. Play

    a. Solitary Play---The earliest stage of play in which the children play by themselves.

    b. Parallel Play---Children play side by side, taking pleasure in each other's company, but without social exchange.

    c. Associative Play---Play in which all of the children are doing the same thing, but separately, still with little interchange.

    d. Cooperative Play---Play in which children discuss and assign roles necessary to a joint venture.

34. Problem solving and thought formation---The ability to relate sensory perceptions to each other in arriving at solutions to problems.

35. Reflex behavior---Automatic responses which govern the neonate's body movements during the first few days of life.

36. Sensorimotor exploration---Exploration by the five senses, body movement, and action resulting in the development of mental concepts of the thing explored.

37. Sensory perception---The capability of perceiving through the senses, which include touch, taste, looking, smelling, and hearing.

38. Siblings---One's brothers and sisters.

39. Social development---The acquiring of the ability to behave in accordance with social expectations.

40. Sperm---The male cell in reproduction.

41. Symbolic functioning---The use of words or other objects to denote persons, places, and things.

42. Toddler---A child from the age of one and a half or two, to three years of age.

43. Uterus---The female organ for the protection and nourishment of the embryo and fetus.

11

CHAPTER III

EARLY CHILDHOOD EDUCATION BACKGROUND

RATIONALE

Sometimes a curriculum can be characterized as being primarily a teacher-centered one or primarily a child-centered one. The general orientation of a curriculum might be around some developmental theorist such as Piaget or a curriculum might be eclectic in orientation, drawing from a number of developmental theorists. In general, a curriculum depends on the philosophy and concerns of those people---both teachers and parents---who develop it.

Individuals must have a knowledge of both traditional and experimental programs before they can design a program to meet the needs of the particular children with whom they are working.

ESSENTIAL CONTENT INFORMATION

I. APPROACHES TO THE STUDY OF CHILD DEVELOPMENT

As the field of child development has grown, a number of theories for its study have developed. These theories provide the framework for the study of child development.

A. Behavioristic

B. Normative-Descriptive

C. Field Theory

D. Psychoanalytic

E. Cognitive-Developmental

II. THEORISTS OF EARLY CHILDHOOD EDUCATION

A. John Locke (1632-1704)

1. A British philosopher who theorized that understanding is derived from one's own experience of the external and social world.

2. Locke presented the idea of tabula rosa (blank tablet) which meant that ideas and knowledge are derived from experience.

3. His ideas were in opposition to the widely-accepted beliefs of Aristotle and Descartes, who theorized that ideas were innate or inborn.

4. Locke believed the object of all education is self-discipline, self-control and self-denial (the ability to control our desires when reason does not necessitate them).

B. Jean Jacques Rousseau (1712-1778)

1. Rousseau was a French philosopher who viewed the child as equipped with an innate moral sense.

2. He felt that a child had intuitive knowledge of right and wrong, but the restrictions imposed by society set obstacles for the child.

3. In his book entitled Emile, Rousseau presents his philosophy of education.

4. The growing child, he states, must not learn by rote what it cannot understand.

5. The child must learn by experience what it can understand.

6. He stressed the child's need for self-expression.

7. Rousseau urged mothers to spend time with their children, surround them with affection, and breast feed them instead of sending them to a nurse outside the home.

C. Frederick Froebel (1782-1852)

1. He was a German philosopher who believed that educating children was similar to cultivating plants.

   a. He coined the term kindergarten, meaning a garden of children.

2. Froebel believed children should be allowed to play, but that teachers could arrange play for them that developed their minds, bodies, and senses.

3. His legacy to education for young children included various attitudes:

   a. School should provide a rich, happy environment for young children.
   b. Education is larger than books or formal drill.
   c. The child's present interests and needs should be the basis of curriculum and creative self-activity should be the method.

d. Play is the child's natural means of expression.
e. The spirit of cooperation and the group are both important to the child's social development.
f. The aim of the kindergarten should be individual development.

D. Jean Piaget (1896-1980)

1. The theories of Jean Piaget have opened our eyes to children's intellectual growth.

2. His studies of mental development---thinking, knowing, perceiving, remembering, recognizing, abstracting, and generalizing---have helped us know how children perceive the world around them at different ages, and why they ask questions and interpret information in ways that seem strange to adults.

3. Piaget has formulated four qualitatively different stages of intellectual development:

a. Sensory-motor---The period, during infancy, when children learn principally through their senses and their activity.
b. Preoperational---The period which extends from the beginnings of language use to around the seventh year. Using language, children deal in new ways with those things with which they come into physical contact. They sort objects into classes, observe likenesses and differences, and begin to learn causes, results, and sequences of events. Children's reasoning is limited by the inability to extend thinking beyond themselves and their own experience.
c. Period of concrete operations---The starting point of thought is still the real and the concrete, but now children can think beyond the here and now. They can generalize, see ahead and back up in the thinking process.
d. Period of formal operations---About the age of eleven children's thinking is at last released from actual situations and objects. They can now envision alternatives to the way things are done and advance possible solutions for their improvement. As a crowning achievement they become able to evaluate the quality of their own thoughts.

E. Marie Montessori (1870-1952)

1. An Italian physician and educator, Montessori's work with handicapped and disadvantaged children led her to develop a philosophy and educational method for working with young children.

2. She saw children as essentially good; education as a process of natural unfolding of what had been given children at birth.

3. She felt that children learned as they interacted with a stimulating environment.

4. The six basic components of the Montessori classroom environment are:

   a. Freedom
   b. Structure and order
   c. Reality and nature
   d. The Montessori Educational Materials
   e. Development of community life

III. CONTEMPORARY THEORISTS---INTELLIGENCE AND INTELLECTUAL DEVELOPMENT

A. J. P. Guilford

The primary implication of Guilford's work is that intelligence is a many faceted and complex resource, not easily measured or estimated by few instruments or quick judgements.

B. Jerome Kagan

Kagan's view of intellectual development has focused on changes and continuities and is based on the concept of schemes, which is a continuous process affected by heredity and environment.

C. Jerome Bruner

Bruner's work is in many ways an extension of Piaget's, with at least two exceptions. One is that Bruner avoids stages, preferring to consider intellectual growth as a gradual process. Bruner also questions Piaget's notion of disequilibrium. Bruner's three major instruments are action, imagery, and symbolic representation.

D. J. McVicker Hunt

Intelligence is viewed by Hunt as the product of interaction between the individual and the environment.

IV. PSYCHOLOGICAL SOCIAL VIEWS

Psychology is currently divided into three major branches, each offering a different model of human nature. The three models are the psychoanalytic model, the behavioristic model and the humanistic model. Each model contains numerous theories that vary somewhat, but the models remain distinct.

A. Erik H. Erikson

Erikson's Eight Ages of Man encompasses an entire life span. Early childhood stages include the development of trust, autonomy, and initiative.

B. Abraham H. Maslow

Maslow's hierarchy of needs model offers explanations for what motivates people. He suggests gratification of basic needs such as physiological needs, safety, and love must precede the higher level needs of esteem and self-actualization.

C. B.F. Skinner

Skinner's behavioral theory has as one of its main tenets the generalization that all behavior is learned. Behaviorism focuses on reinforcements, generalizations and discrimination.

D. Bandura and Walters

This is a social learning theory with greater emphasis on the social context in which learning takes place. This distinguishes their theory from other behaviorists, with focus on imitation and modeling in explaining children's behavior.

V. MORAL DEVELOPMENT VIEW

Lawrence Kohlberg---Research by Kohlberg and his associates has been interpreted to indicate that there is a natural series of three stages

through which all children's moral reasoning must pass. This sequence is related to the child's level of intellectual development. Moral development in children can be promoted by discussing moral dilemmas and encountering higher points of view.

VI. INTEGRATED VIEWS

Robert J. Havighurst and Phillippe Muller have incorporated key concepts from other theories into a single framework that considers many aspects of development. Havighurst's concept of developmental tasks and Muller's tasks of childhood arise from three sources: physical maturation, societal expectations, and personal goals and values.

VII. PHILOSOPHIC VIEWPOINTS

A. Environmentalist Model

Humans are constantly being shaped by impinging environmental forces. Environmentalists urge that the shaping of behavior in teaching be done intentionally and be directed toward desirable goals since knowledge and skills are acquired piece by piece, in cumulative fashions. The primary task of teaching is the careful sequencing of what is to be learned. It is the adult perogative and responsibility to determine what the child should become and find the most effective and efficient means for structuring the program to achieve that result.

B. Maturationists Model

Maturationists emphasize the regularities within the organism. Within the "normal" or typical setting, all children are expected to develop at whatever rates their own innate capacities permit. To maturationists, teaching and child rearing involve the provision of an accepting and comfortable setting within which children can follow their own interests and needs within socially acceptable frames of reference. Instructional materials and educational experiences may be provided as they show readiness and interest. Maturationists prefer to foster the development of the "whole" child in directions inherent within him or her rather than toward specific objectives.

C. Interactionist View

Interactionists assume that development, behavior, and learning are substantially influenced by both environmental influences and maturational processes. It is derived from insights by Piaget, who maintains that cognitive processes emerge from organism/environment interactions. They differ from maturationists in attaching crucial importance to life encounters, and unlike environmentalists, they believe learning experiences cannot effectively be prestructured or accelerated to any appreciable degree. The crucial cognitive aspects of development are to be acquired through massive general contacts with the physical and social world. The fullest development stems from a broad range of child initiated experiences coupled with encouragement, guidance, and constant interchanges with teachers and peers.

D. Eclectic Practice

It may be difficult to find any "pure" models or approaches in real-life settings since each program model is modified each time it is implemented. Each subsequent implementation brings further modifications. Eclectic early childhood programs are more common than any other kind.

CHAPTER IV

OBSERVATIONS OF CHILDREN

RATIONALE

The evaluation of both the child's development and the effectiveness of the program for fostering that development is essential to any program. One of the most effective evaluation tools is observation of children and their behavior. With several observations, a pattern of development and behavior in individuals can be assessed and their progress measured. Such records can also provide a good indication of the achievement of the program's goals.

ESSENTIAL CONTENT INFORMATION

I. IMPORTANCE OF RECORD KEEPING

- A. Shows progress or delays in growth and development of a child over a period of time
- B. Shows individual growth patterns
- C. Shows special behavior and possible influences for adapting our guidance techniques
- D. Provides concrete information for referral in parent conference
- E. Our memories sometimes fail us.

II. FACTORS WHICH INFLUENCE ACCURATE RECORDS

- A. Be aware of meaningful behaviors.
- B. Accuracy of perception of what is observed
- C. Accuracy in recording exactly what is observed

III. STRIVE FOR ACCURACY IN OBSERVING AND RECORDING

- A. Obtain a Scientific Attitude
  - 1. Be objective

2. Observe the child with an unbiased eye as much as possible.

3. Examine biases and/or personal involvements to achieve a higher degree of accuracy in record keeping.

B. Achieve an Appropriate Concept of What Children are Like

1. When we are children, the teachings of adults are impressive and remain with us.

2. When judging how children should behave rather than how children actually do behave, adults too often rely on what their own parents have taught them.

C. Recognize that Children Reveal Themselves in Special Ways

1. All behavior is caused; however, it is difficult to understand/decide the reasons for some behavior.

2. Only by learning to see children as they are and as they see themselves will we uncover clues to solve the mystery.

3. Recording their ways of communicating helps us see them as they are.

4. Children communicate in many special ways.

   a. They communicate non-verbally on a strong physical, emotional basis:
      (1) The body expresses joy with a jump, anger with a kick, friendship with a push, curiosity with a touch, thinking with a flip of the hand.
      (2) The eyes, the quality of the voice, body posture, gestures, facial expression, activity level (listless or energetic) are indicators of what the child is trying to tell us.
   b. They communicate verbally through language.
      (1) Be cautious in using this as a sole indicator of understanding children's behavior.
      (2) Children's language skills are very limited; therefore it is difficult to tell others what they are precisely thinking, feeling, etc.
   c. Thus, they tell us by what they do and by the way they do them, what is going on inside.

D. Record Data Frequently and in Many Situations.

IV. WHAT TO LOOK FOR WHEN OBSERVING YOUNG CHILDREN

A. Physical Appearance

1. What does the child look like?

2. How is the child dressed?

3. Does the child seem to be in good physical health?

B. Body Movement and Use of Body

1. Are the child's body movements characteristically quick or slow?

2. Does the child seem "at home" with body movements, or stiff, clumsy, unsure?

3. Are the large muscle and small muscle coordination about equally developed, or is one more developed than the other?

C. Facial Expressions

1. How much of what a child is feeling is expressed in facial expressions?

2. Do reactions, minute by minute, "show" in the child's face?

3. Do they "show" only when the child feels intensely about something?

4. Does the child characteristically maintain a blank expression?

D. Speech

1. How much of what child feels is expressed through tone of voice?

2. Is the voice generally controlled, or does it express changing moods?

3. Does the child talk more or less than usual when upset?

4. Is speech an important means of communication, or does the child speak rarely, communicating in other ways?

5. Does the child like to "play" with speech, making up chants, puns, stories?

6. Is speech fluent, average, choppy, inarticulate?

E. Emotional Reactions

1. How and when does the child exhibit happiness, anger, sadness, doubt, enthusiasm?

2. Is there too little control over feelings, too much, or a good balance?

F. Relationships with Other Children

1. Does the child seek out other children; how and when?

2. Does the child seek only specific children?

3. Are other children avoided, specific children; how and when?

4. Does the child wait to be sought out by others?

5. How does the child respond to another child's invitation to play?

6. Does the child spend a lot of time watching other children; specific children; certain activities?

7. Is the child generally a "leader," "follower," sometimes one and sometimes the other?

8. Is the child comfortable with other children, able to give and take, and to share ideas and equipment?

9. Does the child seem fearful, "bossy," unable to share ideas and equipment?

10. Is the child unhappy when personal need or desires are not met?

11. Is the child unduly inhibited about expressing personal ideas to other children?

12. Is the way of relating to other children age-appropriate, precocious, or immature?

G. Relationships with Adults

1. Does the child seem basically to trust adults or to mistrust them? How does the child show this?

2. Is the child indifferent? Does the child seem to need to be physically near teachers at all times or just need to have them in sight?

3. Does the child seem comfortable and friendly with adults?

4. Is the child demanding, anxious, placating, defiant, different at different times, and/or with different people?

5. Does the child seek out comfort or avoid being comforted by an adult?

6. Does the child ask for adult help, when and how?

7. How does the child react to being limited?

8. How does the child ask to be limited?

9. Does the child spend a lot of time with adults?

10. Are ways of relating to adults age-apprpriate, precocious, immature?

H. Play Activities

1. In what activities does the child get involved?

2. Does the child play for a long time at something or play briefly at one thing after another?

3. Are there activities the child avoids?

4. What does the child seem to be getting out of an activity?

5. What aspects of an activity seem especially frustrating or especially pleasurable?

6. Does the tempo of play remain even; does it speed up, or slow down?

7. Does the child prefer to be alone when playing?

8. Does the child express fantasy in play verbally, or gesturally?

9. What roles does the child enjoy taking in dramatic play; baby, mother, father, dog?

10. Does the child seem to feel more comfortable playing indoors or outdoors?

11. Does the child like to confine play to a narrow area in space, or does he/she prefer to expand over a large area?

12. Does the child try new things?

13. Does one show curiosity about one's environment, equipment, people?

14. Does the child have special skills: music, carpentry, painting, dramatic play?

15. What indications do you see in one's play that would suggest appropriate or inappropriate masculine/feminine identification?

I. Basic Needs

Do you notice anything in particular about habits and feelings about food, elimination, sexuality, sleep (rest)?

V. TYPES OF RECORDS

A variety of observations/records should be made on each child in order to gain a better picture and understanding of the growth and development of that child.

A. Anecdotal Notes

1. Even random notes contribute to understanding a child's behavior.

2. They usually record characteristic behavior, or significant behavior, or examples of a particular type of behavior.

B. Diary Record (or Running Record)

1. Such a record covers observations over a period of time, including all that can be recorded in that time interval.

2. It gives a good picture of a child's characteristic behavior.

C. Sampling Records

These records document observations taken at repeated intervals.

D. Selected Observations

1. These records document selected and specific types of activities, such as rest, in housekeeping area, or on first day of school.

2. These records help to give a picture of a specific behavior.

VI. ITEMS IN AN OBSERVATION

A. Child's Name

B. Child's Age in Years and Months

C. Time of Observation

D. Date of Observation

E. Name of Center

F. Name of Observer (or the initials)

G. Name of Adults/Children Participating in Situation

H. Description of Activity/Situation/Setting/Behavior

1. Record as objectively as possible.

2. Avoid using subjective words, such as good, bad, pretty.

3. Accurately describe the behavior as observed (think of yourself as a movie camera, recording what you see and hear).

I. Language

1. Whenever possible use quotation marks and the exact words of children and adults.

2. Exact words are often significant.

3. Avoid paraphrasing what children have said.

J. Interpretation of Observations

1. Interpretations include what you think the behavior means and what questions arise in your mind about it.

2. Evaluative words such as good, bad, pretty, ugly, angry, are part of the interpretation. These are a part of subjective evaluation.

3. Comments/interpretations should be put in parenthesis or recorded in "special comments" section.

4. Avoid making sweeping statements with words like "always" and "never" unless they can be documented.

VII. TIPS ON OBSERVING AND RECORDING BEHAVIOR

A. Note Taking

1. Obtain a small hardback notebook or 3" x 5" cards on which to take notes.

2. Carry notepad/cards with you through the day.

B. Position

1. Be unobtrusive, yet close enough to hear what children are saying.

2. Avoid attracting child's attention.

3. Make brief notes.

4. Devising your own shorthand is helpful.

5. Complete notes at end of each day, if necessary.

C. When to Record

1. Record notes in a variety of situations, and at different periods of the day.

2. This will highlight behaviors such as relationships with adults, children, adjustment to school, feelings about routines, etc.

D. Make Folders in which to put each day's notes.

E. Record as accurately and as objectively as possible.

F. Make Interpretations of Observations at the end of each day.

G. Confidentiality

1. Keep all records/observations confidential.

2. Discuss observations only with other staff/parent/or other involved professionals and NEVER in front of children.

3. DO NOT LEAVE NOTES LYING AROUND.

H. Frequency

1. Make a practice of keeping notes daily.

2. The more records, the better picture one can obtain of a child.

VIII. FINAL REPORT

Detailed and accurate recording of behavior over a period of time furnishes a child care worker with much information about the child. These observations should be "pulled together" at the end of each school year or upon exit from school for each child. This will be helpful for future staff in working with the child as well as for end-of-the-year parent conferences. The following can be drawn out of the records (daily, health, home visits, etc.) and should be summarized into an overview of the child's development or final report.

A. Physical Development

1. Physical Description

   a. Height
   b. Weight
   c. Color of eyes, hair, complexion
   d. Body build, bone structure
   e. Energy level
   f. General appearance (grooming, movement, etc.)
   g. Posture
   h. Rest
   i. Appetite
   j. General health appraisal
   k. Handicaps
   l. Habits and feelings about food, elimination, sleep

2. Physical Abilities

   a. Large muscle
   b. Fine muscle
   c. Comparative large and fine muscle development
   d. Kinds of activities in which participation is greatest
   e. Eye-hand coordination
   f. Any area needing further development

B. Social/Emotional Development

1. General behavior attitude (cheerful, unhappy, etc.)

2. Reaction to new situations, school adjustment, new materials.

3. Reaction to failure or frustrating situations

4. Response to limits

5. Peer relationship

   a. Does the child seek other children? Who, how, when, at what level of play (solitary, parallel, or cooperative)?
   b. Is the child usually a leader or follower?
   c. Is the child independent or dependent in relationships with peers?

6. Adult relationships

   a. Does the child trust or mistrust adults; how is this shown?
   b. Does the child ask for adult help; how, when?
   c. Does the child give/receive affection with adults comfortably?

C. Intellectual Development

1. General awareness; is the child listless or alert, curious?

2. In what kind of play activities does the child usually participate?

3. How does the child use imagination, use materials?

4. What is the child's attention span?

5. How advanced are the child's language skills?

   a. Vocabulary
   b. Speech
   c. Sentence structure
   d. Listening skills

6. How accurate is the child's concept formation?

   a. In knowledge of the world
      (1) What kind of information does the child possess of mechanics, social relationships, natural processes, basic information (colors, names, etc.)?
      (2) How confused or accurate is this information?

(3) How does the child show knowledge of this information; through play, stories, talking, etc.?

b. In abstract concepts

(1) Does the child demonstrate an orientation in time and space? (Days of week, departure time, seasons, age directions, etc.)

(2) Does the child have the ability to generalize and deduce (reasoning)?

(3) Can the child conceptualize by seeing relationships (parts to whole, etc.)?

(4) Does the child understand basic mathematical concepts (number of children in group, on one hand, etc.)?

7. Areas needing further development or help

D. Interpretations and Recommendations

After having looked closely at the total child (physically, socially, emotionally, and intellectually), it is good to tie it all together, to interpret these summaries, and to give recommendations based on them for the future growth and development of the child.

1. What trends of behavior occur?

2. What areas/behaviors need further development?

3. What are the impressions of the "whole" child?

4. What areas/behaviors show the child's growth?

5. Do any extremes in behavior exist?

6. What is the prognosis (what the future may hold) and further recommendations for this child's growth?

7. How are all the observations on behavior interpreted together?

8. How often has the child been observed? One observation does not provide as accurate a record of the child's ability or behavior pattern. Two children cannot be compared accurately, a child should be compared only to himself.

CHAPTER V

NATURE OF CHILD GROWTH AND DEVELOPMENT

RATIONALE

The basis for a recognition of deviations-from-normal development lies in the ability of the individual to recognize normal patterns of growth and development. The scientific study of children reveals commonalities in patterns of development. While each child grows at an individual rate, the sequence of developmental events is the same for all children. The individual should be able to recognize these sequences in order to plan learning activities appropriate for the child at each stage of development.

ESSENTIAL CONTENT INFORMATION

I. IMPORTANCE OF THE STUDY OF CHILD DEVELOPMENT

The study of child development provides the foundation of knowledge necessary for working with young children. Through an understanding of this knowledge, the individual will be able to:

A. Gain a better understanding of self.

B. Gain a better understanding of children.

C. Prepare for parenthood.

D. Plan programs for young children.

II. MAJOR DEVELOPMENTAL-AGE PERIODS

There are no universally accepted age-stages in developmental studies. Different authorities divide the early years into periods that seem most useful in their particular area of study. The developmental age periods listed below seem appropriate for child care purposes. Different breakdowns will be found in other materials.

A. Prenatal---From conception to birth.

B. Neonatal---From birth to one month.

C. Infancy---One month to eighteen months.

D. Toddler---Eighteen months to three years.

E. Early Childhood---(Approximately) Three years to six years.

III. DEVELOPMENT TASKS (Havinghurst)

Developmental tasks are those common tasks an individual in a given stage must master in order to be happy and to achieve the tasks of the next stage.

A. The need for some tasks rises from physical maturation or readiness of the body, some from the pressures of our culture, some from the personal values and wishes of the individual.

B. In determining the timing of educational efforts for young children, it is well to consider the three signs of the "teachable moment":

1. When the body is ready.

2. When society requires.

3. When the child is individually motivated.

C. Below are Havinghurst's suggested developmental tasks for the early years of birth through age six:

1. Learning to eat solid foods.

2. Learning to walk and use fine muscles.

3. Learning proper toilet habits.

4. Learning to communicate with other people.

5. Achieving independence and self-care.

6. Learning sex differences and modesty.

7. Forming concepts of reality.

8. Learning to distinguish and internalize concepts of right and wrong.

9. Learning to identify with parents, siblings, and others.

IV. PRINCIPLES OF DEVELOPMENT

Principles of development are generalizations about growth and development that can be applied to every age of every area of development---physical, intellectual, social and emotional. They are generally considered universally valid.

A. Development is the result of the individual's response to their environment.

B. Development is a continuous and gradual process.

C. Development is most rapid during the early years.

D. The various aspects of development are interrelated.

E. Each individual has a particular rate and pattern of development which tends to remain constant.

F. The sequence of development is dependable and predictable, exact timing is not.

G. Development is a process of specialization and individualization.

V. HEREDITARY AND ENVIRONMENTAL INFLUENCES

Hereditary and envtronmental influences are derived from different sources and are unique within each individual. Neither heredity nor environment is most important: each plays its own special role.

A. Hereditary: Each child is born with certain capacities for growth which determine the wide limits within which that child can develop.

B. Environment: Each child experiences certain forces which interact with hereditary to shape and influence the development of that child as it takes place.

VI. DEVELOPMENTAL NEEDS (Maslow)

Maslow suggested that all human beings have the same basic needs. He organized these needs into a hierarchy, the most basic needs of which must be satisfied before the higher needs have power to motivate our actions.

A. In the order of their potency in influencing development, these needs are:

1. Physical needs
2. Safety needs
3. Belonging and love needs
4. Esteem needs
5. Self-actualizing needs

B. In planning programs for young children one must consider the gratification of each of these needs.

1. The physical needs of young children should be considered in setting up the daily schedule. Provision for adequate amounts of food and water, for rest times and for active play should be made. Temperatures should be moderate and good ventilation arranged.

2. Safety needs are met as the program provides non-threatening surroundings for children that are orderly and predictable so that they can begin to anticipate events and direct their own activity.

3. Belonging and love needs are met as the teachers consider the children as individuals and include them in the plans and activities of the program; "home-like" environment helps children know that they are loved and accepted.

4. Esteem needs are met as activities are selected which allow the children to succeed more than they fail. Teachers need to encourage and appreciate each child's contribution to the group.

5. Self-actualizing needs can be provided for by giving children the materials and the freedom to be creative, to adapt things to their own imaginations, to solve some of their own problems, and set some of their own goals.

VII. DEVELOPMENTAL TASKS (Havinghurst)

A developmental task is a common task to be accomplished by an individual. Successful completion of sequential tasks allows for smooth orderly growth and development. Unsuccessful completion of tasks limits the individual's ability to progress in an orderly pattern. Categories of behavior and specific tasks for infancy and early childhood follow.

DEVELOPMENTAL TASKS FOR INFANCY AND EARLY CHILDHOOD

A. Achieving an appropriate dependence-independence pattern

1. Infancy

Establishing one's self as a very dependent being

Beginning the establishment of self-awareness

2. Early childhood

Adjusting to less private attention: becoming physically independent (while remaining strongly emotionally dependent)

B. Achieving an appropriate giving-receiving pattern of affection

1. Infancy

Developing a feeling for affection

2. Early childhood

Developing the ability to give affection

Learning to share affection

C. Relating to changing social groups

1. Infancy

Becoming aware of the alive as against the inanimate, and the familiar as against the unfamiliar

Developing rudimentary social-interaction

2. Early childhood

Beginning to develop the ability to interact with age-mates

Adjusting in the family to expectations it has for the child as a member of the social unit

D. Developing a conscience

1. Infancy

Beginning to adjust to the expectations of others

2. Early childhood

Developing the ability to take directions and to be obedient in the presence of authority

Developing the ability to be obedient in the absence of authority where conscience substitutes for authority

E. Learning one's psycho-socio-biological sex role

1. Early childhood

Learning to identify with male adult and female adult roles

F. Accepting and adjusting to a changing body

1. Infancy

Adjusting to adult feeding demands

Adjusting to adult cleanliness demands

Adjusting to adult attitudes toward genital manipulation

2. Early childhood

Adjusting to expectations resulting from one's improving muscular abilities

Developing sex modesty

G. Managing a changing body and learning new motor patterns

1. Infancy

Developing physiological equilibrium

Developing eye-hand coordination

Establishing satisfactory rhythms of rest and activity

2. Early childhood

Developing large muscle control

Learning to coordinate large and small muscles

H. Learning to understand and control the physical world

1. Infancy

Exploring the physical world

2. Early childhood

Meeting adult expectations for restrictive exploration and manipulation of an expanding environment

I. Developing an appropriate symbol system and conceptual abilities

1. Infancy

Developing preverbal communication

Developing verbal communication

Rudimentary concept formation

2. Early childhood

Improving one's use of the symbol system

Enormous elaboration of the concept pattern

J. Relating one's self to the cosmos

1. Early childhood

Developing a genuine, though uncritical, notion about one's place in the cosmos

CHAPTER VI

PRENATAL DEVELOPMENT

RATIONALE

One of the most critical periods in the development of a child begins at the time of conception. Events in the prenatal period provide the basis for the total developmental process. A basic knowledge of the stages of prenatal development and an understanding of the many influences---fixed and variable, positive and negative---which effect the unborn child enhances the teacher's ability to recognize and meet the individual needs of each child.

ESSENTIAL CONTENT INFORMATION

I. STAGES OF PRENATAL DEVELOPMENT

At the moment of conception, the first of the three stages of prenatal development begins. The total period of prenatal development lasts approximately forty weeks.

A. Period of the Ovum

This stage begins with conception and ends with the fertilized ovum attaching itself to the wall of the mother's uterus. This is called implantation. This process usually takes ten to fourteen days. During this time the ovum, which began as a single cell, subdivides to form a large mass of cells.

B. Period of the Embryo

This stage begins when the ovum is firmly attached to the wall of the uterus and lasts until the end of the second month. During this period, the developing baby is called an embryo, and develops rapidly to form a mass of cells into a recognizable human form.

1. All of the body systems have begun to form and some have begun to function.

2. Muscles and the cartilage that will develop into bones have begun to develop.

3. Hands with stubby fingers, feet with stubby toes, arms, legs form.

4. The brain and nervous sytem are developing rapidly.

5. The period of the embryo is a period of rapid growth during which the foundation is laid for the normal development of all body systems. It is a critical period to all future development.

C. Period of the Fetus

The period of the fetus extends from the end of the second month until birth. The baby is called a fetus at this period.

1. The various body systems become well developed and begin to function.

2. Fingernails, toenails, and hair appear.

3. The fetus can move during the ninth week, but movement is not felt by the mother until about the sixteenth week.

4. The fetus can suck, swallow, and hear by the end of the sixth month.

5. The development during the last three months is in preparation for birth and independent living. If born prematurely during this period, the baby would have a good chance of survival, although the closer birth occurs to the end of the forty week period, the more refined are the body processes and the easier the transition from uterine to outside living.

II. THE PRENATAL LIFE-SUPPORT SYSTEM

The astronaut walking in space has a life-support system: his space suit, his backpak, and his life-line. The prenatal child also has a life-support system: the amniotic sac, the placenta, and the umbilical cord.

A. Amniotic Sac

The amniotic sac is the "bag of waters" in which the embryo/fetus lives and grows during the months before birth. Its main purpose is protection. It provides a cushion against the pressures of the mother's body and the shocks of her bumps and falls. It also keeps the delicate prenatal tissues moist and resilient and provides some nutrients.

B. Placenta

The pad of blood-rich cells built up in the uterine wall is called the placenta. Its purpose is to process the resources of the mother's body so they can be used by the baby. By osmosis, through the placenta, the baby receives oxygen, fluids, and the nutrients which form the developing body.

C. Umbilical Cord

The baby's life line, the umbilical cord, connects the placenta to the embryo or fetus. It serves as a circulation channel taking vital elements from the placenta to the baby and returning waste products to be eliminated by the mother.

III. CRITICAL PERIOD OF PRENATAL DEVELOPMENT

This period, in which rapid growth is occurring, is critical. Harmful incidents which occur during this critical period can have heightened effects on the developing baby.

A. The first three months of prenatal development are a critical period for the development of organ systems. It is during this period that they are beginning to emerge.

B. The first three months of prental development are critical for the development of human features: arms, legs, feet, head, hands, and facial features are taking shape.

C. Harmful environmental influences during this critical period can cause serious, permanent changes. Influences such as malnutrition, disease, and physical or chemical agents which affect the mother may abuse the embryo.

D. The effects of environmental influences after the first three months can cause permanent damage to the developing fetus, but they can no longer change the basic structure of the organs and physical features which have previously been formed.

IV. THE INFLUENCE OF HEREDITY AND ENVIRONMENT ON PRENATAL DEVELOPMENT

A. Heredity

Each individual inherits the potential for the development of certain characteristics. In other words, heredity determines the possibilities and limitations for development of certain characteristics. The mechanisms of heredity start the child developing and control the sequencing of development. Half of the baby's hereditary genetic material (twenty-three chromosomes) is received from the mother, and half (twenty-three chromosomes) from the father. The father's contribution determines the sex of the child. Other genetically-determined features include body build (tall, thin, short, stocky), color of hair and eyes, facial features, and other physical characteristics. Some diseases are caused by genetic faults.

B. Environment

The environment in which the individual develops, both before and after birth also influences the course of development. This influence may be either positive or negative. Several years ago there were a large number of infants born with deformed arms and legs because their mothers took a drug called thalidomide while they were pregnant. The presence of this drug in the mother's bloodstream changed the prenatal environment and resulted in the deformities. As a positive example, the proper and adequate nutrition of the mother before and during pregnancy creates a prenatal environment that is beneficial to the development of the newborn infant.

C. Heredity and Environment Combined

The prenatal environment, which is determined by the physical and emotional state of the mother, is of utmost importance in encouraging or limiting the development of inherited potential. It is possible that the individual who has an inherited potential for a height of

six feet may actually only grow to five feet, ten inches due to the negative effects of the prenatal environment.

V. NEGATIVE INFLUENCES ON PRENATAL DEVELOPMENT

The influences on prenatal development are many and pervasive. Those interested in the health and vigor of the prenatal child should be aware of these influences and be alert to deal with them positively. Heredity, nutrition, the emotional health and the amount of rest the mother receives, various physical and chemical agents, diseases, and the mother's age---all may affect prenatal development.

A. Influences Which May Affect Prenatal Development Negatively

1. Difficulties of development may result from genetic (inherited) faults (phenylketonuria, hemophilia, sickle cell anemia, etc.).

2. If the RH factors of the mother's and the child's blood are not compatible, fetal anemia may result.

3. Radiation or X-ray of the mother may interfere with the normal development of the embryo.

4. Quinine, barbituates, tranquilizers, hard drugs (heroin, LSD) and perhaps even such an innocent drug as aspirin, may damage they embryo.

5. If the mother has German measles, rubella, during the first three months of pregnancy, distortions may occur in embryonic growth.

6. Both excessive smoking and drinking seem to be positively related to the occurrence of high-risk situations at child birth and in the newborn.

7. Emotional disturbances of the mother are associated with a high level of activity and irritability in the fetus and the newborn.

8. The earliest (teen-age years) and the last (over 30) of the mother's childbearing years are related to some difficulties.

B. Positive Ways to Assure Optimum Prenatal Development

1. Parents who know there are genetic difficulties in their families can ask for genetic counseling before conception or ask for a testing of the amniotic fluid to check for incidence of the disease in the embryo.

2. Early determination of parental RH blood factors in one of the checks made by the physician or clinic when pregnancy is first suspected. An incompatibility signals the doctor to keep careful check on the vital signs of the fetus. He can institute major life-saving measures if a danger level of anemia is reached before birth or can recognize the possible need for the hospital to stand ready for an after-delivery transfusion. Measures are also available to protect future children from the buildup of damaging antibodies in the mother's body. Parents should be alert to see that these measures are employed as a part of the mother's after-delivery care.

3. It is hoped that vaccination of young children against rubella may also protect pregnant women from exposure to this threat.

4. Because of the adverse effects of many common drugs and medicines on prenatal development, it is recommended that women, during the child-bearing years be extremely cautious of the drugs and medicines they take. During the critical embryonic period, most women do not yet realize they are pregnant. Therefore, no medicines should be taken without a doctor's prescription and all medications should be reviewed with a doctor as soon as pregnancy is suspected. To take the known-abusive drugs is to risk the life, or the life-long health of the unborn child.

5. Check for any possibility of pregnancy before proceeding with the routine use of X-ray diagnosis or radiation therapy.

6. The ages twenty to thirty are the woman's optimum years for child-bearing. This is the period when there are the least complications in pregnancy for both the mother and the child.

7. One of the most positive influences, and one of the easiest for most mothers to arrange, is adequate nutrition. The growth and development of the cells of the human body depend on the food the mother eats. The developing baby must depend on the diet of the mother for all nutritional needs. The doctor, on an early visit, should outline an adequate diet and monitor weight gains throughout pregnancy. Excessive food curtailment is not considered wise.

8. There is also considerable evidence that proper nutrition during the woman's teen years aids the development of a strong and well-functioning body which responds easily and well to the rigors of pregnancy.

C. Despite possible adverse influences, most babies are surprisingly sturdy and are born healthy and normal. The mother helps assure this optimum development in the prenatal child by:

1. Putting herself under the care of a doctor or prenatal clinic as soon as pregnancy is suspected.

2. Eating adequate amounts of nutritional food.

3. Getting adequate rest and relaxation.

VI. THE BIRTH PROCESS

A. Stages of the Birth Process

Birth occurs about forty weeks after conception. There are three stages in the birth process:

1. Opening of the cervix (mouth of the uterus)

2. Emergence of the baby

3. Expulsion of the placenta (afterbirth)

B. Approaches to Birth

There are a number of ways to handle childbirth. Some of the obstetrical approaches are used to alleviate difficulties; some are used routinely to ease childbirth for the mother.

1. Caesarian Section

   a. In a Caesarian section the baby is surgically removed through an incision in the mother's abdominal and uterine walls. This is done when the mother's birth canal is not adequate for normal delivery or when a rapid delivery is dictated for some reason.

2. Drugs

   a. Various pain-relieving drugs are available for use at the discretion of the obstetrician.
   b. The use of any drug during childbirth negatively affects the infant's ability to cope with the stresses of the labor and birth process, but one should realize that some medication may be necessary and the doctor should use such medications advisedly.

3. Prepared Childbirth

   a. While widely heralded and used successfully by many pleased parents and physicians, it is not accepted by all doctors.
   b. If parents wish to use the training and methods of "prepared childbirth," they should select an obstetrician who will work with them. The doctor may reserve the right to use other obstetrical measures if the situation demands.

CHAPTER VII

NEONATE AND INFANCY

RATIONALE

Understanding of the early thrusts for growth in young children is imperative since it is the most rapid stage of growth after birth. Because growth is rapid, deprivations can have a great impact on development. The growth of young children in areas of cognition, language, motor development and autonomy will take place in a predictable sequence, though at each child's own rate. At this stage children will relate to their world through their senses. Therefore, care given must provide for sensory stimulation.

ESSENTIAL CONTENT INFORMATION

I. THE NEONATE'S TRANSITION TO LIFE OUTSIDE THE WOMB

A. Appearance

1. Skin is wrinkled and loose with a waxy vernix covering.

2. Head is often elongated and lumpy.

3. Eyelids are puffy and eyes may look small.

4. Usually fine dark hair covers the head and may also be scattered over the newborn's body. This hair disappears at the latest, about the fourth month of life, leaving the baby soft and smooth.

5. Average birth weight for American babies is $7\frac{1}{2}$ pounds. The size of babies varies with many factors.

B. Respiration

1. The newborn makes a transition from being a water-born parasite to an air-born independent individual.

2. Normal breathing is irregular, rapid, and shallow.

3. Coughing, sneezing, and yawning are reflexes with important survival value. Coughing and sneezing clears air passages and lungs of mucus; yawning provides the infant with additional air when it is needed suddenly.

C. Nutrition

1. The newborn changes from obsorbing nutrients through the placenta to taking food into the mouth and stomach.

2. Hunger contractions, sucking, and swallowing reflexes are present at birth.

D. Elimination

1. The first material evacuated from the colon is waste accumulated before birth from cellular breakdown, intestinal secretion, bile, and swallowed mucus and amniotic fluid.

2. Then stools assume characteristics that are dependent upon the type of food intake.

E. Temperature Regulation

1. The neonate's mechanisms for maintaining a stable body temperature are unstable.

2. The newborn gets along best in a controlled temperature with clothing and bedding carefully regulated to maintain a steady temperature.

II. THE CONCEPT OF HOMEOSTASIS

Much of the behavior of the newborn can be explained by the concept of homeostasis or the maintaining of a state of physiological equilibrium in the newborn.

A. The tension due to hunger, wet diapers, need for sleep, etc., is relieved by food, dry diapers, or sleep, etc.

B. Equilibrium is continually being disturbed and restored in a new state.

C. As states of equilibrium are disturbed and restored, changes in the newborn's behavior result because of new experiences and the need to find equilibrium with different conditions.

D. Growth and development take place as infants seek to relate their needs to the world around them.

III. RELATIONSHIP DEVELOPMENT THROUGH THE NEONATE'S SENSES

A. Tactile Senses

1. The tactile senses include the skin, inner ear, lips, mouth,. and other body orifices.

2. The skin is the focus of the newborn's contact with the environment and relates the infant to sensations of heat, cold, pressure, and pain.

3. Patting, caressing, cuddling, carrying, rocking, changing position, washing, drying are tactile experiences that sooth and promote the well-being of babies.

4. These experiences are the child's basis for getting meaning from other sensory experience, for personality development, and for interpersonal relationships.

B. Hearing

1. Hearing is an important source of sensory stimulation.

2. Babies can make fine hearing discriminations which are very meaningful to their well-being and existence as well as being another of the ways they begin to gain sensory data about the world.

C. Vision

1. Vision is present in the newborn and visual stimulation elicits responses in the eyelids, neck, circulation, respiration, and the whole body.

2. Some eye fixation occurs in the first day of the newborn.

3. The newborn's head will turn to follow a visual stimulus within the first few days after birth.

4. The newborn can focus on objects.

5. Perceiving the faces of nurses or caregivers is an early type of visual experience.

D. Coordination of Vision and Hearing

Although the newborn's vision and hearing are now well coordinated, they become better coordinated as the child learns through experiences.

E. Taste

The sense of taste is present in newborns who often accept sweet tastes while having tendencies to reject salty, bitter, or sour tastes.

F. Smell

During the first few days of life, the newborn is quite sensitive to strong odors and can discriminate between different odors.

G. Pain

1. The newborn's pain sensitivity increases steadily during the first few days of life.

2. Gastrointestinal upset results in a great deal of crying in the newborn, while such things as pin pricks and circumcision seem to cause less pain.

3. The newborn appears to be more sensitive to some kinds of pain than to others, as part of nature's way of helping the newborn cope with a new environment.

H. Temperature

1. Newborn babies are capable of making responses to cold or warm stimuli.

2. The newborn increases muscular activity in response to drops in temperature.

IV. INTELLIGENT BEHAVIOR IN THE NEONATE

A. The resources for intelligent behavior include the capacity for seeing, hearing, tasting, and smelling.

B. At birth the brain has developed certain capacities and has the potential for later development.

C. The lower portions of the brain control the vital physiological processes and the reflective behaviors.

D. The higher brain centers control learning, thinking, remembering, and reasoning.

E. The lower portions are developed and functional at birth.

F. Capabilities for intelligent, mental behavior during the first week include: seeing patterns of light and dark, focusing at a distance of eight inches (beyond that vision is hazy), being sensitive to sound, distinguishing volume and pitch, distinguishing taste, stopping sucking to look at something, and shutting out disturbing stimuli.

V. PERSONAL, EMOTIONAL, AND SOCIAL BEHAVIOR

A. Foundation for Behavior

1. The neonate has the resources and potential for the development of personal, social, and emotional behavior.

2. There is a wide difference among the newborns in their reaction to stimulation, amount of sleep and crying, tempo and speed of growth, and vigor in feeding behavior.

3. Such individual differences play a subtle part in causing different responses from the infant's social environment, such as the responses of the mother toward the baby.

B. Emotions

1. Early emotion in the neonate is aroused by internal and external conditions such as hunger, temperature change, and a wet diaper, etc.

2. Specific emotions such as fear, anger, joy, and affection are likely not to exist at first, but the potential for their development is present.

C. Socialization

During the first week the neonate shows responses of excitement and distress, smiles spontaneously and fleetingly to sensory

stimulation, becomes alert to and tries to focus on a face or voice, quiets when picked up, and searches for a nipple.

D. Personal Development

1. Responses in the neonate during the first week of life involve efforts which are directed toward maintaining feelings of well-being.

2. A sense of trust develops as the baby is fed, comforted, and stimulated by a caregiver and actively plays some part in bringing about these experiences.

VI. APPEARANCE OF THE INFANT

A. Babies show individual differences in appearance which become more apparent as the infant matures and grows.

B. A baby has soft smooth skin and coarser hair than the neonate, in a shade similar to what it is going to be.

C. The baby has a large forehead, large eyes, small nose and chin, and plump cheeks.

D. Birth weight is doubled by four or five months and tripled at one year.

VII. PHYSICAL GROWTH AND DEVELOPMENT OF THE INFANT

A. The growth of the infant proceeds rapidly at a pace not reached again in the child's life.

B. Seemingly simple acts such as reaching for and grasping an object begin with crude shoulder and elbow movements, both aim and approach are clumsy.

C. As skills are mastered, they become increasingly more complex and new skills are combined with previously-mastered ones.

D. The child's ability to walk, for example, is the end result of a long series of physical developments.

1. First with the ability to raise the chin up at one month.

2. Then to raise the chest up at two months.

3. Then to reach and yet miss the object sought.

4. Then to sit with support, on a lap, in a highchair, and eventually to sit alone.

5. Then to stand with help before standing alone.

6. Then finally to walk alone at approximately fifteen months.

(The age at which individual infants accomplish motor tasks vary; therefore these are approximate ages).

VIII. MOTOR DEVELOPMENT

A. Maturation in Motor Development of the Infant

1. Nature has established an orderly timetable; when good nutrition and opportunity are present, each child's individual growth pattern will unfold.

2. When a child is organically ready, growth takes place.

3. Growth and development cannot be substantially hastened by efforts in training before the child is ready.

4. It is the responsibility of parents to provide the child with the raw materials of food, love and attention, care, safety, and the freedom to learn and explore.

B. The Concept of Indigenous Motivation in the Motor Development of the Infant

1. Indigeneous motivation is the spontaneous effort of children to exercise their growing physical and motor skills.

2. Infants naturally seek to exercise and practice their developing physical abilities.

3. Safe opportunity without physical restraint and confinement must be available for growing children to practice their developing skills.

4. Such activity as reaching, grasping, hand and eye-finger coordination, creeping, crawling, sitting alone, standing with help are all activities that children will do naturally when they are organically ready.

IX. COGNITIVE DEVELOPMENT

A. Overview of Mental Development in the Infant

1. Mental development progresses rapidly. Each new skill acquired and each new experience becomes building blocks for further development.

2. Cognitive development takes place as sensory and perceptual processes develop and as the child has many experiences.

3. Each new experience is assimilated into a store of experiences and finds an accommodation with previously-stored information.

4. Infants seem to have a built-in motivation, curiosity, and impetus for mental growth, as they find much satisfaction in observing, handling, and making things happen in their world.

5. An example of such built-in motivation for cognitive growth is the intense enjoyment infants demonstrate while observing a mobile, then causing it to move by accidentally batting and by repeatedly striking the mobile to cause more movement.

B. Stages of Cognitive Development Defined by Achievements

1. Sensorimotor development

   a. During this stage infants come to know objects and background of the immediate environment in terms of real things such as mother, father, bottle, bed, rattle, etc.

b. They form a sense of object permanence or constancy, which is an awareness of objects as separate from themselves and existing even when absent. For example, infants of four months who are still building perceptual and cognitive schemes will not search for a rattle which has been placed under a blanket out of their sight.

c. The infant of seven or eight months who has achieved a sense of the permanence of objects will actively search for the missing rattle placed under the blanket.

2. Piaget has described six stages of sensorimotor development which enable infants to come to know their immediate environments. These stages are defined in terms of achievements.

a. Reflex movements are practiced, improved, and consolidated in starting the life-functions of the infant.

b. Infants learn to relate parts of themselves to other parts, such as sucking a thumb and touching their hands together and fingering them, looking at their hands, and at objects grasped in their hands.

c. Interesting events are repeated and prolonged. When a change in the environment is caused by their actions, they are likely to repeat those actions, such as hitting a mobile.

d. Infants actively relate a definite means to and end, such as searching for a vanished object.

e. Infants try to experiment and produce new events to see what will happen; they are curious and seek out new experiences. Throwing and dropping toys are common kinds of activity in which infants learn about movement of objects, disappearance, and reappearance.

f. Infants arrive at mental solutions by thinking, without any action, by representing objects and actions to themselves by thought. In this stage, infants can think of objects that are not present, of past events, and of events that might happen to include behaviors of imitation and pretending.

3. The development of trust

a. A sense of trust puts down its developmental roots in infancy.

b. The early experiences of obtaining necessary food, in having diapers changed, and in being handled and cared for reinforce good feelings toward other people and self.
c. The security of experiencing tension reduction and consistency in physical care provides good feelings of having needs met.
d. Such security carries over into childrens' feeling that they can increasingly meet their own needs as their skills develop.
e. Childrens' appreciation of order in their world and a feeling of control over their movements are essential for the development of a basic sense of trust.
f. Feelings of mistrust develop from a dominance of discomfort, disappointment, anxiety, inability to explore things around them, inconsistency in having their physical needs met and inconsistent emotional encounters with adults.
g. When feelings of inability to have their needs satisfactorily met exceed feelings of security, then the normal development of a basic sense of trust does not take place.

4. The development of self-concept and autonomy

a. During infancy the beginnings of awareness of the self are developed.
b. Infants become aware of themselves as objects distinct from other objects and people.
c. Awareness of the body as part of self-image begins to develop relative to pleasant and unpleasant body feelings resulting from tension and tension reduction.
d. The awareness of self continues to develop as infants find out that events around them may be caused by them.
e. The two week old infant shows excitement when presented with a familiar face or object.
f. During the second month the infant coos and smiles when approached by a friendly person.
g. From about the third month, children's self-awareness is expressed through imitation, repetition of events, and self-regulation of their actions.
h. Children begin to realize and find pleasure in their ability to be the cause of responses and actions from their mothers.

i. With the beginning development of language and locomotion, the sense of autonomy develops.

j. Such common responses as "no" and "me-do" demonstrate increasing self-awareness of the child.

k. The informed parent recognizes how the infants develop and provide them with the love, attention, and physical care that are essential foundations to the development of good feelings about themselves.

l. Parents or caregivers should be willing to set limits that are clear and firm within which the infants can make choices that are not beyond themselves.

m. Frustration and anger are more frequent in the latter part of infancy due to frustrations resulting from either the lack of or too many restrictions on the infant's behavior.

n. Successful autonomous infants are the result of choice-making and decisions which lead to successful encounters within their environments.

X. DEVELOPMENT OF LANGUAGE IN INFANTS

A. Basis for Language

1. Infants understand the words of others before they have the ability to form word sounds and to use words meaningfully.

2. Before the first year infants can respond to the words of others.

3. The process of learning to reproduce sounds probably begins with gestures, facial expressions, and tone of voice. As certain recurring situations and experiences are associated with words, the words come to stand for the object or experience. Thus it is particularly important to talk to infants.

4. Although infants may not respond to words at first, they associate words with emotional experiences such as joy, laughter, being held, etc., which develop a motivation to participate in the use of language to convey feelings and needs.

B. Sounds

1. In the second and third months, infants make throaty and gurgling noises.

2. In the fourth month, cooing may be observed in response to another person's presence or attention.

3. Babbling is highly characteristic about the fourth month and is a significant step in stimulating and reinforcing sounds and in exercising the vocal system.

4. During the sixth and seventh months, infants vocalize several well-defined syllables; sometimes during the sixth to ninth month, there is an effort to duplicate through imitation the sounds they hear others make.

5. At about eleven or twelve months, infants may be able to imitate "dada" or "mama".

C. Words

1. The second year is characterized by growth in the ability to form words clearly and distincly and in using single words to express a complete thought.

2. By the end of the second year, infants usually use simple phrases and sentences.

XI. VALUE OF PLAY AND STIMULATION TO DEVELOPMENT

A. Play is childrens' work. It is an important medium through which growth and development takes place. Infants should be played with from the beginning in the form of gentle snuggling and rocking and later moving towards simple activities and word games.

B. They need appropriate physical and mental stimulation and activity to satisfy their natural urge to the unfolding of growth and development.

C. Jean Piaget holds that the more new things children have seen and heard, the more new things they want to experience; the greater variety of stimuli with which they have coped, the greater is their capacity for coping.

D. In playing with infants, it is important to let the development take place according to each infant's own timetable and not your expectations.

1. The play activity should provide the crucial experience of feeling loved; it should let infants develop according to their readiness and not adult expectations.

2. The games should be simple and fun, involving both words and physical activity for which children are ready.

CHAPTER VIII

PHYSICAL DEVELOPMENT - TODDLERHOOD AND EARLY CHILDHOOD

RATIONALE

Childrens' bodies are of utmost importance since they are the "shells" for the social-emotional-intellectual development. Without proper development of the physical body, other areas of development are impaired. Therefore, it is important for those working with young children to understand physical development and how to encourage it in the early childhood program.

The first stage of human development is basically physical. Piaget's theories of early development indicate that in the beginning infants perceive themselves and the world only in a physical sense. As other aspects of development emerge, increasingly complex physical skills enable children to achieve mastery of their world. Through their understanding of children's physical developmental norms, parents and teachers must be able to provide learning activities for psychomotor development.

ESSENTIAL CONTENT INFORMATION

I. IMPORTANCE OF PHYSICAL DEVELOPMENT

When physical development is encouraged preschool children are helped to obtain:

A. A good self-concept

B. Skills required in muscle and body control

C. Good health habits

D. Intellectual skills

E. An appreciation of other people's accomplishments

F. An emotional release

G. Social skills

II. ASPECTS OF DEVELOPMENT AFFECTED BY PHYSICAL DEVELOPMENT

A. Social

1. Influences others' expectations. Example: If a child is large, usually more advanced skills are expected.

2. Influences others' acceptance. Example: The obese or unattractive child usually experiences more difficulty in making friends.

B. Emotional

Influences self-concept. Example: If children are petite, they may develop the attitude of being "too little to do anything," or if they have developed good motor control, they may gain self-confidence because they can do things well.

C. Intellectual

1. Physical development influences ability to learn because children learn through their bodies.

   a. All basic learning is through sensory experience: touch, taste, sight, smell, hearing.
   b. Children try out what they perceive in muscle experiences: body awareness, space awareness, form awareness, locomotor skills, and creative movements. Example: If children have a hearing handicap, their language skills may be impaired.

2. Physical development influences initiative to learn. Example: If children are well-nourished and energetic, it is much easier for them to learn than if they are malnourished and listless.

3. Physical development influences type of skills that can be developed. Example: If children are tall and coordinated, they can more easily become good basketball players.

III. FACILITIES NECESSARY FOR PHYSICAL DEVELOPMENT

A. Equipment and Space are Needed for the Following Activities:

1. Resting, eating, and toileting

2. Gross and fine muscle activity

3. Indoor and outdoor activity

4. Active and inactive play (quiet and noisy)

B. Equipment and space should be scaled to the physical size and abilities of the children.

IV. EFFECTIVENESS OF A DAILY SCHEDULE IN MEETING PHYSICAL NEEDS

A. The daily schedule should be built around the physical needs of the children.

B. The scheduling of time should be made with the following considerations:

1. Providing routine times for physical refueling.

   a. Toileting
   b. Snacking or eating
   c. Resting

2. Providing periods of both quiet and active play to prevent fatigue in children.

3. Arranging periods for gradual movement from active to quiet activities. Abrupt changes result in tension in a group of young children.

4. Arranging the most active play in morning.

5. Providing large blocks of time for self-selected activity and few transition periods (going from one activity to another). Transitions from one activity to another are difficult for children.

V. ACTIVITIES IN THE CURRICULUM TO PROMOTE PHYSICAL DEVELOPMENT

A. Plan activities for the physical development of preschool children daily. Children who are growing rapidly need many opportunities to practice all kinds of motor skills.

B. Since all growth is interrelated, provide activities which satisfy the childrens' social-emotional-intellectual needs as well as promote their physical development.

C. Provide a variety of activities which promote both gross and fine motor development and coordination.

1. Gross

   a. Block building
   b. Climbing
   c. Riding vehicles
   d. Running, jumping games
   e. Musical activities

2. Fine

   a. Assembling puzzles
   b. Cutting
   c. Making finger paintings
   d. Using peg boards
   e. Playing finger games

D. Provide activities which promote sensorimotor exploration of the body.

1. Learning parts of body

2. Learning how the parts of the body move

3. Experiencing space in relation to the body

4. Learning the feeling of direction

5. Learning to relax

6. Learning to make heavy-light movement, etc.

E. Provide sensory activities requiring children to use their senses first-hand.

1. Smelling a flower
2. Tasting a carrot
3. Seeing a fish swim
4. Hearing a drum
5. Touching a frog
6. Matching color
7. Matching shapes
8. Feeling textures
9. Recognizing objects by sense perception

VI. CHART OF MOTOR DEVELOPMENT

A. Reminders

1. Charts are for the "non-existing" average.
2. Consider the total development of the children.
3. Compare children only to themselves and their own past records. Is their growth continuous and progressing in proper sequence?

B. Records

1. Records of growth and development should be kept on each child.
2. Update and review records frequently.

CHAPTER IX

SOCIAL DEVELOPMENT

RATIONALE

Man is a social being. He lives in groups, in families, and in communities. Yet very young children know little of the world outside themselves, and their ability to understand the actions of others is limited. Gradually, though the early years, parents and teachers must help them understand the patterns of social living and guide them into satisfactory ways of relating to others.

ESSENTIAL CONTENT INFORMATION

I. BEGINNINGS OF SOCIAL REACTIONS

A. From their earliest days, babies are fascinated by the sound of a human voice and the sight of a human face.

1. They stare with rapt attention at each face that comes into their line of vision.

2. They respond to loving talk.

B. Babies respond in their own unique fashions and thereby set up their own patterns of social interchange on which later social development will be based.

C. By the eighth month most infants recognize the important people in their lives by sight and reserve their socializing for them, reacting to strangers with distress.

II. INTERRELATIONSHIP BETWEEN SOCIAL DEVELOPMENT AND HEREDITY

A. Early environment has a lasting and profound influence upon the social development of the child.

B. Basic to this development are the inherited tendencies which stamp even the baby in the hospital nursery as an individual with personality and uniqueness.

C. Different patterns of response and activity are observable in these young children.

D. When combined with such environmental factors as family size, birth order, presence or absence of a parent, continuity or discontinuity and emotional climate, they result in the development of individuality in social response.

III. IMPORTANCE OF EARLY SOCIAL INFLUENCES

A. Source of Learned Behavior

1. Infants' primary source of learned behavior is the actions and mannerisms of the adults around them.

2. Authorities are in agreement that imitation and identification are important factors in the process of socialization.

3. Children imitate the behavior of parents or primary caregivers, including voice inflections, body stance, and patterns of verbal or physical aggression or retreat.

B. Early Models

1. The values, concerns, and attitudes of adults become children's own values, concerns and attitudes.

2. Later imitation and identification between children and others are secondary experiences that may act to modify earlier behaviors.

3. The model of the early caregiver for young children strongly resists modification.

4. Early influences are so strong that even though individuals may wish to change certain behavior patterns in themselves, the behavior may well continue to resist change or be modified only after considerable distress to the individuals and quite possibly to other people.

C. Importance of Positive Influences

1. Since young children are easily influenced through imitation, it is important that social influences and experiences are positive.

2. Young children are not selective in what they imitate. They will try almost anything, good or bad.

3. Children can be influenced to be social, unsocial, or anti-social, depending upon their early experiences.

4. If the total climate of the childrens early environment is favorable, favorable social attitudes are likely to develop.

IV. STAGES OF DEVELOPMENT

A. Development of a Sense of Autonomy (Erikson)

1. Before young children can make progress in interpersonal relations, they must come to some basic understandings about their own personhood.

2. Between the ages of one year and three years children put great emphasis on "doing their own thing," of being independent and able to do things by themselves.

3. A battle rages between infants' need for separation from parents and their need for the equally-pressing security the parents signify.

4. Brazelton says, "The big job for the child of this age is that of resolving the struggle between being controlled by outsiders and of learning controls for himself/herself."

5. According to Erikson, if the child is not allowed to "develop his will as he learns his duty, a deep sense of doubt and shame may result and he may learn to expect defeat in any battle of wills with those who are bigger and stronger."

6. The sense of autonomy which comes with the successful resolution of this struggle leads to a feeling of competence which is at the root of the child's future progress.

B. Development of a Sense of Initiative

1. Three, four, and five-year-old children are busy discovering what kind of persons they are.

2. They are experimenting with plans, ideas, imagination, and action through play.

3. The development of a sense of initiative involves fantasy and imagination that is mixed with the real world of people and things.

4. They are living with the intense feelings associated with discovering the kind of persons they have the potential to be in relating the world to themselves.

5. Young children can be, in their imaginations, fathers or mothers, bunnies, lions, or heroes, by pretending or playing parts.

6. This imaginative play is normal and is childrens' way of learning to relate themselves to the world.

7. The failure to achieve a sense of initiative may lead to a sense of inadequacy and low self-esteem.

C. Development of a Sense of Conscience

1. In the early childhood years children begin to develop a conscience.

2. With guidance children begin to learn concepts of right and wrong. In fact, children at this age are quite vulnerable to attempts to over-organize the conscience.

3. If young children are made to feel guilty about too many things by well-meaning adults, their social and emotional development may be retarded.

4. Guidance techniques that rely upon shaming or forcing may lead to severe guilt feelings and have a crippling effect on the development of children.

5. This is especially true if the importance of the development of autonomy and initiative, mentioned above, is not understood.

6. Through firm, loving and consistent guidance, young children can begin to understand and accept ideas of right and wrong.

V. INFLUENCE OF CHILD-REARING PRACTICES ON SOCIAL DEVELOPMENT

A. Democratic Environment

1. Children reared in a democratic atmosphere are more apt to be active and socially out-going.

2. The democratic environment is characterized by respect, interaction between child and parent, spontaneous expression of love, and clear consistent limits on behavior.

B. Authoritarian/Permissive

1. Children reared with authoritarian methods are often quiet, non-resistant, well-behaved and unaggressive.

2. Children whose caregivers are too lenient and fail to set limits on their behavior may feel that these adults do not care about them and have difficulty adjusting to social rules and regulations later in life.

VI. SOCIAL BEHAVIOR IN EARLY CHILDHOOD

A. Social development begins as infants and the adults who care for them develop patterns of social give-and-take.

1. If adults respond to the needs of infants in reasonably appropriate ways, the infants respond by being happy and alert.

2. Both infants and adults are mutually pleased with one another.

3. The basic framework for social interchange has been laid.

B. If adults cannot make the effort, or, in the case of especially demanding children, cannot find ways to comfort these children, then early social experiences may be troubled and unrewarding.

1. Infants may learn not to trust the world to be good to them and erect barriers between themselves and others.

2. Caregivers may in frustration reject the children or be torn with guilt over the failure to please them.

3. The adult needs to realize that babies cry and fuss, some more than others; all babies are at times inconsolable. They go through many traumas in the process of adjusting to the world.

4. If basic needs are met, however, and comfort is offered, the incidences of crying are minimized.

5. Routinely well-cared-for babies cry less and react more spontaneously than do babies who are cared for inconsistently.

C. Much of the infant's socializing is with adults or older children.

1. Until the age of two, young children together tend to continue their solitary or parallel play.

2. There is little social interaction except perhaps to watch or imitate each other, or appropriate each other's toys.

3. As they mature, adult expectations and play with other children help them to adapt to other's desires, to give and take, and to begin to share possessions.

4. Through imitation of the actions, words, and examples of others, the child learns to conform to group needs.

D. Social development is not easy.

1. It is an uneven process; in fact behaviors that appear antisocial are to be expected in young children.

2. Their inability to put themselves in another's situation makes it difficult for them to relate to others realistically.

3. Adult understanding and guidance can help children take rebuffs and learn acceptable ways of getting along with others.

VII. CHARACTERISTIC FORMS OF SOCIAL BEHAVIOR THAT APPEAR IN EARLY CHILDHOOD

A. Negativism---The Resisting Behaviors of Young Children

1. Negativism involves a combination of self-assertion, self-protection, and resistance to pressure.

2. Negativism may be expressed in physical tenseness, failure to carry out requests, pretending not to hear, stubbornness in routine activities such as eating and toileting, walking away, hiding, holding of the breath or the well-known "NO."

3. It is a common behavior between the age of eighteen months and three years.

4. It is a sign of childrens' wanting to have some control over their activity.

5. It is a part of the struggle for autonomy.

6. The greater children are frustrated by inconsistent limits on behavior and rigid adult impositions on what they may or may not do, the greater the negativism.

7. Negativism is best handled by adults who protect childrens' safety, limit damaging and unacceptable behavior firmly but loveingly, and are able to be flexible and understand most childrens' very real needs to find that they can do things and change things "all by themselves."

8. We are very proud of older children who show independence, make up their own minds, and persist in the face of difficulties. The foundation is laid here.

B. Aggression, An Actual or Threatened Act of Hostility

1. Aggressive behavior is often a reaction to frustration resulting in an attack upon another person or object.

2. It may be displaced anger when children cannot express anger directly.

3. The greater the frustration, the more aggressive a child is likely to be.

4. When aggression leads to reward in the form of attaining goals or in reducing anxiety, the use of aggression will continue.

5. It will also continue in those children whose parents or caregivers are permissive toward aggressive behavior.

6. Children who are punished physically show more aggressive behavior than children whose caregivers take a middle-of-the-road approach to discipline.

7. Association with adults or other children who exhibit a good deal of aggression increases the incidence of aggression in the child's behavior.

8. The incidence of aggression is greatest during fatigue.

9. Some aggression is normal social behavior and may be released directly through active play activities.

10. Some children will need help in releasing angry feelings in ways that do not hurt themselves or others.

C. Quarrel, an Angry Encounter That Starts With a Justified or Unjustified Complaint

1. Quarreling does not necessarily mean that children dislike each other.

2. Once the quarrel ends, children usually forget it and are friendly and cheerful.

3. Quarreling may involve destroying others' work, taking away their toys, screaming, crying, biting, kicking, hitting, name calling, and making derogatory statements.

4. Most young children use physical attacks in attempting to settle a quarrel.

5. They need help in substituting "words for blows."

D. Arguments, Verbal Quarrels or Disagreements

1. They have real value in social relationships.

2. Without the freedom to argue, shy children are powerless to make their needs known and aggressive children do not learn to consider the needs and wishes of others.

3. Children can be helped to argue well, to express their needs and feelings plainly and reasonably.

4. With support, children can learn to accept another's disagreement without dismay and gradually learn the social arts of compromise and consideration.

5. The ability to argue will lessen the pressures of group life.

6. It gives children the assurance that they can cope with social situations without sacrificing their self-esteem or resorting to violence.

E. Teasing and Bullying, the Aggressive Behaviors That Usually Lead to Quarreling and Fighting

1. Teasing is a mental attack to arouse an angry response and may involve such things as calling someone by an unliked nickname or calling attention to a physical or mental weakness.

2. Bullying involves attempts to inflict physical pain or imposition upon another because of certain pleasure derived from watching another's discomfort.

3. Bullying may involve such things as pulling hair, pinching, poking, pushing, etc.

4. Children who have feelings of inferiority or insecurity engage in teasing and bullying more often than better-adjusted children.

F. Rivalry, the Desire to Excel or Outdo Others

1. Before the age of four years, competition is not a factor of significance; by the age of six years, however, most children have some competitive spirit.

2. While some competitiveness should be considered normal behavior, rivalry that leads to unacceptable social behavior is not desirable.

3. Rivalry is common in situations where jealousy exists between children.

4. Rivalry, followed by quarreling, is common in the presence of a third person for whose attention the child competes.

5. Adults can reduce feelings of rivalry by not showing preference for children or pitting them against each other.

G. Cooperation, the Common Effort Between Persons for Mutual Benefit

1. Before the age of three or four, little cooperative play among children can be expected.

2. Their inability to grasp what the other children are trying to do hampers cooperative efforts.

3. As they get older, children who have the opportunity to work and play with both children and adults are more likely to work out cooperative ways of handling social situations.

4. Authoritarian attitudes which force cooperation often cause negative attitudes which surface when an authority is not present.

5. Children reared in a democratic way develop more spontaneous cooperative attitudes.

H. Ascendant Behavior

Ascendant behavior is any behavior by which individuals attain dominance over a social situation or are in control of themselves to the extent that they can prevail.

1. The tendency to try to dominate others is very common in our culture.

2. Behavior to gain dominance usually begins around three years of age and increases as opportunity for social contacts increases.

3. When directed into socially acceptable leadership, ascendant behavior can be of great value both to the child and to society.

I. Generosity, the Willingness to Share With Others

1. Young children are normally egocentric.

2. When they begin to play with others, they learn to temper self-interest with group interests.

3. Considerable learning about possession---what is mine, what is yours, what is ours---must precede spontaneous generosity.

4. The social rewards of group activity help children accept the need to share.

J. Desire for Social Approval, Leading to Attempts to be Accepted and Noticed

1. Infants like to be noticed and sense when they are the center of attention.

2. As children grow older they are increasingly anxious to win the approval of others, first with parents and then with their peers.

3. When children do not get adequate attention in socially approved ways, they often seek attention in socially unacceptable ways. They show off, and noisily demand attention because they feel neglected.

4. Praise and encouragement generously given for acceptable behaviors help children feel more secure and lessens their need for evidences of acceptance.

K. Sympathy, Behavior in Which One is Affected by the Emotions of Another

1. Young children who have been treated sympathetically will often respond sympathetically to others with pats, hugs and kisses, by trying to help others, by trying to remove or attempt to remove the cause of distress, and by inquiring to find the cause of distress.

2. Children who are insecure and too absorbed in their own problems or those whose experiences have been such that they cannot understand the distress of others, will show unsympathetic behavior.

L. Dependence

Dependence is exhibited by children who rely unduly upon their parents, other adults, siblings, or their peer group for attention and affection.

1. Dependent behavior is characterized by seeking help when it is not needed, seeking attention and approval beyond what would be expected, and being easily influenced.

2. Children are trained to be overly-dependent by having too much done for them, by having too few responsibilities, and too few opportunities to learn to do things for themselves.

3. Our culture demands a great deal more independence of young children than many other cultures. If adults are aware that these demands for independence require much effort from an unexperienced child, they can balance expectations for achievement with many chances to repeat and enjoy non-demanding activities.

4. They can accept retreats into more dependent behaviors which will come on occasion.

M. Friendliness, An Act Showing Kindly Interest and Goodwill Toward Others

1. Children want to be friendly.

2. They are learning to relate to others and have not always learned to relate themselves to others in the best way.

3. A friendly contact may quickly develop into a quarrel with the quarrel being of short duration and a friendly relationship re-established.

4. Friendly approaches to other children are more frequent than aggressive approaches.

5. There is a gradual increase in expressions of friendliness as children grow older and learn to express their own affections.

VIII. GUIDELINES FOR HELPING CHILDREN ACHIEVE SOCIALLY ACCEPTABLE BEHAVIOR

A. Undesirable behavior tends to get more attention from adults than socially acceptable behavior. Try to keep a balanced view and do not over-emphasize the unacceptable aspects of children's behavior.

B. Do not ignore repeated undesirable behavior, however. Tell the child clearly what behavior is acceptable and be consistent in enforcing the limits you have set. If childrens' unacceptable behavior is ignored or they get the results they want, they will assume that it is socially acceptable.

C. State rules in positive terms. Much of children's unacceptable behavior is the best they know to do in a situation. Tell them a better way. For example, instead of "Don't push each other on the slide," it is easier for the child to do the acceptable thing if the rule is stated, "One child at a time on the slide." Instead of, "Don't kick Joannie under the table," it help to be told, "Put your feet on the floor."

D. When a child is having trouble in a social situation, suggest a socially acceptable behavior and show how it leads to more satisfying results than unacceptable behavior.

E. Through stories, conversations or real-life situations show children how cooperation, friendliness and consideration for others makes for happier relationships.

F. Give young children just learning language simple words and phrases to use in expressing their needs and wants. Reinforce with your presence and your encouragement their attempts to use "words instead of blows."

G. Be aware that the way adults relate to children and to other adults is a powerful teaching tool. Children tend to recreate the social relationships they experience.

CHAPTER X

EMOTIONAL DEVELOPMENT

RATIONALE

It is the responsibility of the parent and/or teacher to provide an atmosphere of security and encouragement for young children who are learning to live with strong and sometimes frightening feelings. The parent and/or teacher must understand the normal feelings of young children, intellectual conflicts which children have when they are not always able to believe what they hear and see, and the guidance techniques which will help these children toward a realistic acceptance of their own feelings.

ESSENTIAL CONTENT INFORMATION

I. FACTORS INVOLVED IN EMOTIONAL DEVELOPMENT

There are three factors involved in the development of specific emotions such as anger, affection, joy, etc.

A. Innate Ability

1. Babies are born with a generalized ability to respond emotionally.

2. This ability must be developed through maturation and learning into specific emotions.

B. Maturation

The development of specific emotions is dependent, in part, on neural and on endocrine development.

1. Neural development

a. This refers to the maturation of the parts of the brain responsible for emotional behavior which has depth and can be maintained over a period of time.

b. The emotional responses of young children are spontaneous and short-lived, whereas those of adults are deeper and may be maintained over a long period of time.

c. Neural development also influences intellectual development which results in the ability to see meanings in situations which were not previously seen; a longer attention span; the growth of imagination and understanding; and the ability to remember and to anticipate events or situations.

d. These abilities, in turn, affect emotional responses.

2. Endocrine development

a. The endocrine glands, such as the thyroid and adrenals, produce secretions which are important in emotional responses and are essential to the development of a mature level of emotional responses.

b. As these glands mature, the individual develops the potential for more specific emotions and responses.

C. Learning

1. Maturation makes it possible for children to feel and respond to a variety of emotions.

2. Learning influences the way in which children respond to the emotion and the situations which arouse specific emotions.

3. Learning accounts for many of the differences in emotional behavior found among children of the same age and between children of different ages.

II. CHARACTERISTICS OF CHILDREN'S EMOTIONS

There are individual differences in the emotional behavior of children of the same age. Regardless of the individual differences, however, there are certain general characteristics of children's emotions which make them different from adults or even from older children. It is necessary that teachers and parents recognize these differences as normal if they are to help guide a child's emotional development.

A. Children's Emotions are Brief.

1. Young children's emotions usually last for only a few minutes and then end quickly.

2. This is true because children react immediately---with a kick or some other outward response.

3. This helps children "clear the system" of the feelings which were aroused.

4. It is only after children learn to control such responses that an emotional state lasts for any length of time.

B. Children's emotions are intense.

1. Children tend to react with very strong emotional responses to what appear to adults to be matters of little concern.

2. Children react as they feel.

C. Children's emotions change rapidly.

1. Within a matter of minutes children may shift from one emotional state to another---from laughter to tears, from anger to happiness, or from jealousy to affection.

2. They do not dwell on the past.

D. Children's emotions appear frequently.

1. Throughout the day there are many emotion-arousing situations which occur.

2. Young children react to them in emotional ways.

E. Children's emotional responses are different.

1. Because of their differing innate abilities, learning experiences and environments children gradually develop their own individual responses.

2. One child will run out of the room when frightened, another will hide behind mother or father, and yet others will stand their ground and cry.

G. Children's emotions can be detected by symptoms of behavior.

1. Young children have not learned to hide their feelings as well as adults.

2. There are certain symptoms of behavior which reveal the child's emotional state.

3. These include such things as restlessness, fidgeting, frequent urination, nail biting, thumb sucking, eye blinking, speech difficulties, lack of appetite, babyish behavior, frequent crying, stubbornness and hysterical outbursts.

G. Children's emotions change in strength.

1. As children grow older, some emotions which were previously very strong may weaken and others which are very weak may become strong.

2. Much of this change is due to intellectual development, feelings of security, and changes in interest and values.

3. For example, a two-year-old who is afraid of strangers may not be afraid at age three.

H. Children's patterns of emotional response change.

1. The two-year-old's response may be to hit or kick another person.

2. The same child at age four may have learned that hitting and kicking are not acceptable or not allowed. Consequently, this child may call another child bad or tell the child "I don't like you."

III. GENERAL PATTERNS OF EMOTIONAL DEVELOPMENT

Emotional development evolves from the diffuse, general excitement evident in the newborn to the differentiated responses of delight, anger, disgust, fear, elation, affection, jealousy, and joy evident in the older child. Later emotional development tends to proceed in cycles with a period of emotional turbulence followed by a relaxed, conforming period which, in turn, is followed by another period of turbulence. Although most children follow a general pattern, it is important to remember that each child is an individual and may or may not conform to this pattern. Some children may appear to skip over the period of turbulence because they arebasically good natured and agreeable, while other children may be difficult most of the time. Also, some children may go

through these contrary periods at an earlier or later age than indicated below. For these reasons it is important to remember that the following characteristics at specific ages are general patterns and not hard and fast laws of development.

A. From Birth to Eighteen Months

1. With rapidly developing abilities, interests, and desires infants go through many periods of difficulty.

2. These difficult periods are for the most part caused by the children's efforts to do things which they are not able to do.

3. For example, at twenty weeks children may try but be unable to get their knees under themselves while lying on their stomachs, and become frustrated and cry.

B. At Eighteen Months

1. Toddlers of this age seem to be at odds with the world.

2. They are extemely self-absorbed and become annoyed easily when they cannot have their way.

3. They are negative and tend to do the opposite of what they are asked or told to do.

4. "NO!" is a familiar word.

5. They become jealous of the new baby or a strange one on mother's lap and their anger and fear are very strongly expressed.

6. It is easier to distract such children when they are doing something they should not be doing than to tell them "no."

C. At Two Years

1. By the age of two, toddlers are less at odds with their environments than they were at eighteen months.

2. They are more sure of themselves, have greater motor ability, make fewer demands, seem more outgoing and friendly and can better understand others and communicate their own needs and wishes.

D. At Two and a Half Years

1. Two and a half year old children enter another period of negativism.

2. They are learning many things in all areas of development---emotional, social, intellectual, and physical.

3. They know what they want to say, but can't always make themselves understood; they resist pressure to conform and are sensitive to being bossed, shown, helped, or directed because they want to be more independent.

4. Their understandings and desires are often greater than their physical abilities will allow them to express.

5. Such habits as thumb sucking, hair twisting, crib rocking, etc., may increase or occur during this tense period of development.

E. At Three Years

1. Once again these children may be agreeable and cooperative and more considerate of others.

2. They are not as frequently frustrated by failure because of their developing physical skills; they take directions with less resistance; they take pride in a task performed for others; their temper outbursts are less frequent and not so violent; they can be reasoned with and better controlled verbally; and they seek much priase and affection.

F. At Four Years

1. By age four young children are once again going through a period of turbulence. They are frequently termed "out of bounds;" they may hit, kick, break things, and throw things; they may be selfish, impatient, defiant, and boastful; and they quarrel, argue, boss, and compete more than in the past.

2. During this period these children's emotions may change rapidly---one minute they are filled with anger and the next with affection.

3. Four-year-olds are proud of their increasing independence and abilities and do not like to be treated like "babies."

4. They are talkative, curious, and cannot always separate fact from fiction, which may cause them to tell tall-tales.

5. They may blame their own misdeeds on others or even on animals, such as their dogs.

6. Nonsense words and silly rhymes delight them.

G. At Five Years

1. Around the age of five children become relatively quiet and conforming much like the three-year-olds, but at a different level.

2. They like supervision, accept instruction, ask permission, and willingly mind adults.

3. At the same time they may often be tearfully sensitive to criticism and become anxious because of their desire to achieve acceptable results.

H. At Six Years

1. Six-year-olds are exuberant, and open to new experiences, but they may resent direction.

2. Their moods change rapidly, often for no obvious reason.

3. Although six-year-olds may domineer, blame, or criticize others, it is difficult for them to handle this behavior when it is directed at them---they are easily hurt and discouraged.

IV. THE DEVELOPMENT OF SPECIFIC EMOTIONS

The following is a description of the pattern of development of specific emotions, the situations which arouse them, and the forms of response made to them by children between the ages of six months and six years. NOTE: No two children are alike. An individual child may not fit this pattern at all and still be a normal child. These are simply patterns which are common to many children.

A. Fear

Fear starts developing in the infant at four, five, and six months of age. Adults' fears may result in children developing the same fears. Requirements for the development of fear are: (1) sufficient perceptual ability for the child to sense fear in others; (2) the mental ability to think about fear. The situations which cause fear and the responses to fear change as the child matures. Many children's fears and responses may seem quite unreasonable to adults. Yet to the immature and inexperienced child, they are quite reasonable and real.

1. At six months

   a. Causes: being separated from mother, strangers, unexpected and loud noises, sudden movement or falling.
   b. Responses: crying, screaming, stiffening the body, or holding the breath.

2. At one year

   a. Causes: being separated from the mother, high places, strangers, loud noises, and insecure footing.
   b. Responses: crying, screaming, running or crawling away, turning aside, or hiding behind a familiar person or a piece of furniture.

3. At two years

   a. Causes: sudden loud noises, seeing dark colors, large objects, trains, having their cribs or toys moved from their usual places, animals, mother's departure or separation from her at bedtime.
   b. Responses: crying, screaming, or withdrawing---similar to one-year-olds.

4. At three years

   The number and strength of fears reach a peak around the age of three. Three-year-olds are able to recognize dangers which they were unable to recognize before. But at the same time their imaginations are developing and they may have fears of things they think might happen or about things they have heard others talk about.

a. Causes: seeing people of different skin color or masks, the "boogy man," the dark, animals, and mother and/or father going out at night.
b. Responses: The three-year-old may still cry and withdraw, but because of the increased ability to communicate, much crying is replaced by loud protests such as "NO!" "Don't do that!" or "I can't do it!"

5. At four years

a. Causes: imaginary dangers such as ghosts, monsters, sounds, the dark, wild animals, mother leaving, especially going out at night.
b. Responses: Because of social pressures, especially from older siblings and peers the child begins to control the earlier, more direct responses of crying and running away. The four-year-old is apt to try to avoid a behavior like a temper tantrum; or react with nervous mannerisms such as pulling at the ear or clothing, biting nails, sucking thumb, twisting hair, etc.

6. At five years

Five-year-olds have less fears than three or four-year-olds and those they do have are more realistic.

a. Causes: the possibility of bodily harm, falling, mother not returning home, someone close dying, contempt or ridicule, fear of the dark and dogs.
b. Responses: Five-year-olds are developing better skill at avoiding fearful situations, talking about fears, and acting as though they are unafraid. Children may also respond in such indirect behavior as imaginary illnesses in which they may actually feel sick, even though there is nothing physically wrong. Frightening nightmares peak during the fifth and sixth years.

7. At six years

a. Causes: Six-year-olds have more fears than five-year-olds. Many noises may create fear, even such everyday noises as the doorbell, telephone, ugly

voice tones. Also, they may be afraid of sleeping alone in a room, of being lost, that someone is hiding under the bed, something happening to mother or that she may die, of ghosts and witches, and of the natural elements, such as fire, water, thunder, and lightening.

b. Responses: Responses are much like those of the five-year-olds only these children may be better at hiding the fear because peers or siblings make fun of them. These children might pretend to be different or create distractions.

B. Anger

Anger signals an individual that an intrusion has been made. Anger helps energize the person to deal with the situation. The outward manifestations of anger are hostility and aggression. An older child can be angry without expressing it.

1. At six months

a. Causes: being bathed, dressed, held motionless, or physically restricted as well as experiencing minor discomforts, such as hunger.

b. Responses: uninhibited and undirected displays of temper such as crying, screaming, kicking, arching the back, struggling and twisting the entire body.

2. At one year

a. Causes: any physical restrictions or desire for an object which they cannot have or reach by themselves.

b. Responses: One-year-olds' anger responses are still not usually directed at any person or object. They are more apt to cry, scream, and kick vigorously.

3. At two years

a. Causes: Much of the two-year-olds' anger is caused by their desire to do things for themselves and not being able to---such as dressing, bathing, or feeding, not receiving as much attention as desired, when another person has something they want.

b. Responses: attacking the person or object which is the cause of the anger. Temper tantrums are typical.

4. At three years

a. Causes: having to do what they are told to do, having a toy taken away and not being understood when talking. Three-year-olds want to do many things for which they are not yet physically able.
b. Responses: Temper tantrums reach a peak around this age. The child may physically attack the person or cause of the anger, but the anger response does not usually last very long.

5. At four years

a. Causes: Interference in their play by another child, disagreements with others, too many rules created by parents or teacher, being teased or ridiculed, making mistakes.
b. Responses: Remains angry longer than the three-year-old. May still attack physically, but is beginning to use threats and attempts at "getting even." With increased language ability the direct physical reactions are replaced more and more by words.

6. At five years

a. Causes: The situations which cause anger at five are much the same as those for the four-year-old. Because the five-year-old has more interests outside of the home, more sources of annoyances and anger occur outside the home.
b. Responses: While five-year-old boys may still use many physical responses, girls tend to respond with name calling, ridicule, sarcastic comments, rudeness and crying. Having learned that these responses are not tolerated when made to an adult, the child may "get even" by breaking another rule.

7. At six years

a. Causes: Disagreements with peers are the most common cause, but like the five-year-old, the rules of adults are another source.

b. Responses: Teases, gossips, nags, and belittles the person who caused the anger.

C. Anxiety

Anxiety is connected with vague internal fears and develops when the child must contend with too much inconsistency and insecurity. It does not occur much before four or five. A child who shuns peers and always wants to be with parents or younger children may be reacting to anxiety by trying to find a more secure and manageable situation.

D. Jealousy

Jealousy is a normal emotion which is caused by actual, supposed, or threatened loss of affection. It always leads to unhappiness and may lead to minor or major maladjustments.

1. Age and jealousy

   a. Does not become a recognizable emotion until sometime between the ages of one and two years.
   b. May be a very pronounced emotion at eighteen months of age.
   c. Reaches a peak around the age of three years.

2. Causes of jealousy

   a. The birth of another child in the family is the most common cause of jealousy in children between the ages of eighteen months and five years. Children are most likely to be jealous if they are the first born and have been used to all of the parent's attention and if the age difference is between $1\frac{1}{2}$ to $3\frac{1}{2}$ years.
   b. Favoritism
      (1) Without realizing it, adults may favor one child or show it by giving that child more privilege and affection.
      (2) Adults may use one child as a model for comparison and to motivate another child to do better work, behave better, etc.

c. Displays of affection between parents

(1) The young child is often jealous of the father because of his close attachment to the mother. The child does not want to share mother with anyone.

(2) The older children become more jealous of the parent of the same sex. This is because fathers are often more affectionate with daughters than sons after age three, while mothers are more affectionate with sons.

d. Being compared unfavorably with peers

Adults who compare children's accomplishments and behavior create competition among children which leads to jealousy.

e. Envy of another child

(1) Because one child has toys or some other possession another child also wants.

(2) Because one child can do things another cannot do. Envy of this sort usually occurs when the three to six-year-old child begins to have more contact with children outside of the home.

3. Jealous responses

a. From eighteen months to three years.

Between these ages children may physically attack either the person they regard as rivals or the persons whose attention they crave. For example, they might hit or pinch the new baby or the mother. Less direct responses may be showing off, naughtiness, or a return to more babyish behavior such as bed wetting after they have been toilet trained, desiring a bottle, using "baby talk," and seeking unnecessary help in doing things.

b. From three to six years.

Between these ages children respond to jealousy by such things as tattling, belittling, or lying about the person of whom they are jealous. They might become boastful and try to outdo the other person, start having tantrums, biting their nails, or sucking their thumbs, or they may become very selfish or competitive.

E. Joy, Pleasure, Delight, and Happiness

Pleasure, delight, and happiness are all milder forms of joy---these are all pleasant emotions and should be encouraged.

1. At two months

   a. Causes: Physical comfort or being patted, caressed, cuddled, and talked to.
   b. Responses: Infants do not yet realize that mother is the source of their feelings of delight or pleasure. The responses of kicking, beating their arms, blowing bubbles or smiling are made just because they feel good.

2. At four months

   a. Causes: Splashing in their bath, seeing their food coming, seeing or hearing their caregiver coo or make sounds for them and being cuddled.
   b. Responses: Beating their arms, laughing aloud, cooing.

3. At ten months

   a. Causes: Many of the causes are the same as for the four-month-old.
   b. Responses: Bangs toys excitedly, kicks the feet, shrieks with delight and grabs for the source of their delight.

4. At one to three years

   a. Causes: Many of the toddlers' feelings of joy and delight are caused by their own activities, such as learning to walk and run and gaining greater skill in manipulating objects. Also, being played with by others causes pleasure.
   b. Responses: Smiles, laughs or shrieks with delight, bounces or jumps up and down, and claps hands together.

5. At three to six years

   a. Causes: New discoveries, activities involving other children, teasing playfully or playing pranks, hearing or saying nonsense words or rhymes.

b. Responses: Smiling or laughing, giggling, jumping up and down, rolling on the floor, clapping hands, hugging either themselves or the source of the pleasure.

F. Affection

A child learns feelings of affection for others only by experiencing affection from others.

1. At birth to one year

   a. During the first twelve months of life, babies are on the receiving-end of affection.
   b. During this period, they are developing a strong attachment to the mother and building up good feelings toward those who care for their needs and provide security. Babies may hug or kiss someone when told or asked to, but usually not on their own.

2. At one to two years

   a. Sources: Mother and possibly the father, other close family members, or daily caregiver.
   b. Responses: Usually shows preference for the mother by hugging, snuggling into a shoulder, caressing, wanting to be held, or climbing into a lap.

3. At two to three years

   a. Sources: parents, siblings, favorite toys.
   b. Responses: hugging, kissing, patting, stroking, and caressing the person or object they feel affection for.

4. At three to six years

   a. Sources: The child gains more independence and has more contact with people outside of home, other children, relatives and teachers. Children feel more affection for others who like them.
   b. Responses: Wanting to be close to the loved person constantly, taking the other person's hand, or telling the person "I like you" or "You're my friend."

V. GUIDING THE DEVELOPMENT OF SPECIFIC EMOTIONS

The role of the parent or teacher is to help the child cope with unpleasant emotions and gradually learn more mature responses to them and to create an atmosphere in which the child can experience more of the pleasant emotions.

A. Fear

1. Preventing unnecessary fears

   Do not use fear to get the child to behave by saying such things as "you stay on the sidewalk or the policeman will get you." "Quit teasing the baby or I'll take you to the doctor for a shot." or "The boogie man gets bad children at night when they're alone."

2. When children are afraid---DON'T:

   a. Make fun of their fears.
   b. Shame them.
   c. Force them to "face" the feared object, person or situation before they are ready. You interact with the object---let the child be free to come or stay.
   d. Become impatient and treat them as if they were babyish because of the fear.
   e. Feel that it is unnatural or bad for children to have some fear.

3. When children are afraid---DO:

   a. Respect their fears.
   b. Realize that they will outgrow most of their fears.
   c. Help them to gradually overcome their fears. For example, a child who is afraid of dogs may be gradually helped to overcome this fear.
   d. Try, within reason, to spare children situations which you know will cause fear.
   e. Prepare them before a fearful situation must be met, such as necessary hospitalization, moving to a new house, or being left with a babysitter.
   f. Encourage them to talk about their fears. Recognizing and admitting their fears may lessen the emotion.
   g. Let them know that all people feel afraid at times.

B. Anger

1. Preventing unnecessary anger

   a. Create a warm, affectionate atmosphere in which children feel that they are important. If they feel good about themselves, they will be able to withstand more anger-provoking situations.
   b. Do not set unnecessary limits; they will only frustrate children and cause them to feel more anger.
   c. Set a good example by controlling your own expressions of anger. Teachers who lose their tempers and yell at children or punish them are poor models.
   d. Prevent situations which usually lead to anger. Children who are tired, hungry, or overexcited become angry much easier than they normally would. Plan a program which balances active and quiet play and which provides a time for snacks and rest.

2. What to do when children are angry

   a. Encourage them to talk about why they are angry and help them decide if the anger is justified or not. For example, children often become angry when teachers make them take turns swinging. Yet they can be helped to realize that the teacher is trying to be fair to all of them. They may still be unhappy, but, over a period of time, can learn to accept such situations without becoming angry.
   b. Accept children's angry feelings, even when the anger response cannot be tolerated. Let them know that you understand how they feel. For example, tell the child who is hitting another, "I know how you feel, and it's all right to feel angry, but I can't let you hit John. You can express your feelings with words."
   c. Help children to replace physical responses with verbal responses. (Such as in the foregoing example).
   d. Let them know that they can depend on you to help them control their anger responses as well as those of others. For example, "I can't let you kick John, and I won't let him kick you either. I want school to be a safe place for all of us."

e. Whenever possible help angry children find a satisfying substitute activity for what they would really prefer to do. For example, "Screaming doesn't get you a turn. Terry needs a little more time on the swing, then you will have a turn. I will see that you get a turn, but let's work in the sandbox while you wait."

f. Help children who have lost control to regain it. Children who have temper tantrums or have lost control of their anger in other ways need help from the teacher. They may need to be held or removed from the group until they are in control again, but this should never be done as punishment. They need to be reassured that they are still loved and that they can depend on the teacher to help them.

C. Jealousy

1. Preventing unnecessary jealousy

a. Prepare children for the arrival of a new baby by showing them picture books about babies and helping them understand that the baby could be either a boy or girl.

b. After the baby is born, allow special time for the older child, point out the advantages of not being a baby; do not be alarmed or make children feel ashamed if they call the baby names or express their dislike for the new baby.

c. Avoid comparing children, and do not encourage competition among children. Organized games which have winners and losers have no place in the preschool.

d. Encourage recognition of and pride in the efforts of each child by such statements as "It bothers me when one of you calls the other stupid. Neither of you are stupid. We all hammer and nail pieces of wood in our own ways. Everybody's way is special."

2. What to do when children are jealous

a. Encourage children to talk about their feelings and let them know you understand how they feel.

b. Help them find more satisfactions of their own. Sometimes they may need help in developing friendships with other children or they may need help in finding satisfaction in doing things of which they are capable.

c. Give children much affectionate understanding.

VI. GENERAL ENVIRONMENTAL CAUSES OF UNPLEASANT EMOTIONS

A. The general emotional tone of the environment---relaxed or tense.

B. The way children are treated by adults

C. Disruptions of routines---some children become very tense when there is even a slight change in their daily routine. The disruption of the daily routine over the weekend is one reason Monday can be such a "bad" day in the Child Care Program.

D. Adjustment to a new situation---arrival of a new brother or sister, divorce of parents, a new teacher, etc.

VII. EFFECTS OF HEIGHTENED EMOTIONALITY

Because the unpleasant emotions are more often involved in heightened emotionality and because they present more problems for children and for those who live and work with young children, the possible harmful effects of states of disequilibrium on children are discussed below.

A. On Physical Well-Being

The presence of strong emotions causes an immediate increase in heartbeat, blood pressure, breathing, and adrenaline production---all of which provides energy to prepare the person for intense activity. If this energy is not used up in some way, it can cause physical problems:

1. Digestive disturbances

2. Anemia, caused by digestive disturbances

3. Exhaustion

4. Inability to sleep

5. Headaches

6. High blood pressure

7. Allergies

8. Temporary or permanent damage to the structure and functioning of the internal organs

NOTE: The degree to which children are affected and the amount of damage done depends on the strength, frequency, and length of the emotional state.

B. On Behavior

1. Behaves more like a younger child

2. Is not as well-coordinated as usual

3. Makes more mistakes than usual

4. Has more accidents than usual

5. May stutter or slur words when talking

C. On Mental Efficiency

Cannot remember, concentrate, or reason as well as usual.

D. On Social Adjustments

Children who experience frequent or prolonged states of disequilibrium will have a very few happy and satisfying social relationships.

E. On Future Emotional Behavior

1. When heightened emotionality is due to physical causes alone or from the need to adjust to new situations, it may be temporary and limited in its effects.

2. When it comes from psychological or environmental causes, however, it can become a habit.

3. Children may develop into adults who tend to respond with heightened emotions to any similar type of situation.

VIII. EMOTIONAL CONTROL

As children grow older, they are expected to gain control over the forms of emotional responses made and to learn when specific emotional states are appropriate. For example, four-year-olds are learning to control the response to anger when they replace hitting and screaming with words. Furthermore, one-year-olds may become very angry because they are hungry before dinner is ready. However, by the age of three, although children may be hungry before dinner is ready, they have learned that anger will not help; they have learned to tolerate some delay.

A. Importance of Emotional Control

1. Social acceptance

   Children who cannot control their emotions at the level expected for children of that particular age will be considered immature by others---especially peers.

2. Physical health

   a. During the occurence of strong emotions---whether pleasant or unpleasant---all of the body processes speed up. These changes occur quickly and prepare the child for immediate action.
   b. Sustained heightened emotions can cause fatigue and over a long period of stress, lead to physical illness.

3. Mental health

   Lack of ability to control emotions, especially the unpleasant ones, can lead to feelings of guilt, fear, or lack of self-confidence.

B. Effect of Emotional Control

All emotional states are accompanied by both physical and mental preparation for action. Children may control their responses when they are afraid; however, there must be some way of releasing the physical and mental energy which has been aroused. Expressing the emotional response in a socially-acceptable form is not always enough. Some of the common ways in which children release this pent-up energy are detailed below.

1. Moodiness

   a. Children may bottle up the emotional energy for hours or even days, during which time they have a tendency to over-react to almost any situation.
   b. If an unpleasant emotion has been controlled, they will be gloomy and sullen, listless, preoccupied with themselves and uninterested in others.
   c. If a pleasant emotion is controlled they will be pleasant, eager and enthusiastic about whatever they do and will seem to "glow" with an inner satisfaction.

2. Substitute responses

   a. Children can learn to substitue a more socially-acceptable response for their usual responses.
   b. Those who can find satisfying substitute responses are better able to release emotional energy and maintain social acceptance at the same time.

3. Displacement

   In this case children direct the emotional responses toward a person, object, or situation which is not related to the source of the emotion.

4. Regression

   This emotion involves going back to earlier forms of behavior.

5. Emotional explosions

   This involves reacting violently to a seemingly trivial situation. It occurs when children try to control the expression of an emotion too long, or when the emotion is too strong to control. Children thus release the emotional energy, but may feel guilty.

IX. HELPING THE CHILD DEVELOP EMOTIONAL CONTROL

A. Significant Facts About Emotional Control

If teachers are to help children develop emotional control in a

way that is best for them, it is important to remember the following facts:

1. There is no one best way to express a controlled emotion. Teachers must help each child develop those forms which are both socially acceptable and clear the system of the energy aroused by the emotion.

2. The mental aspects of an emotion must be given as much attention and consideration as the physical. Just finding a socially acceptable way to react to anger does not guarantee that each child will stop being angry.

B. Guiding Emotional Control

1. Helping children use up emotional energy in socially acceptable ways

   a. Strenuous physcial activities such as hammering, running, jumping, climbing, pounding clay, or play dough, etc., can use up the pent-up energy. Teachers can guide each child into such activities and gradually help the child learn to recognize when the needs arise.
   b. Using words to express emotions. Children can be helped to use "words instead of blows."
   c. Crying often helps release emotional energy but children soon learn that this is considered babyish. Teachers should not encourage frequent crying, but should help children realize that it is all right for boys and girls to cry. Teachers will need to comfort and sometimes protect the crying child.
   d. Laughing, like crying, can help release emotional energy.
   e. Doll play often permits children to express strong emotions in an acceptable way.

2. Helping children control the mental states which accompany the emotion

   a. Encourage children to talk things over with you. For example, if the children are angry with the teacher for requiring that they put on their jackets before going outside, it will help them if they can understand why they must do this. The teacher can accept their

anger without giving in to it. The teacher must be both affectionate and firm.

b. Goals should be to help the children learn to think about the situation before making an emotional response, to decide for themselves whether a response is justified or not, and to think before reacting.

CHAPTER XI

INTELLECTUAL DEVELOPMENT

RATIONALE

Intellectual development is sequential, involving many developmental processes and influenced by a variety of factors. To provide an environment condusive to each child's intellectual growth, the parent and/or teacher must be aware of the stages of intellectual development, the influencing factors, and those techniques utilized to facilitate learning and stimulate the child's curiosity.

ESSENTIAL CONTENT INFORMATION

I. RELATIONSHIP BETWEEN HEREDITY AND ENVIRONMENT IN INTELLECTUAL DEVELOPMENT

A. Heredity

The inherited intelligence is a potential, dependent upon stimulation from the environment and response from the individual to be developed.

B. Environment

A highly stimulating environment may enhance intellectual growth---a dull, drab, or highly chaotic environment may retard it.

C. Relationship

Clear evidence about the relationship between hereditary and environmental influences upon intelligence is difficult to find. Arguments about the relative importance of either heredity or environment are meaningless because both are required for intellectual development. Both heredity and environment begin to exert influences from the time of conception. They cannot be meaningfully separated from each other.

II. CURIOSITY---THE IMPETUS TO LEARN

A. Definition

Curiosity is an expression of interest in the environment, in one's self, and others.

B. Effect on Development

1. Children have an innate desire to acquire knowledge and become competent in dealing with their surroundings.

2. Healthy children manipulate, discover, repeat experience, and try to adapt what they know to meet their needs.

3. They have strong needs to make sense of the world around them---to see relationships, observe causes and effects, and determine sequences or patterns of events.

4. This interest in the environment, in self and in others shows itself most clearly in the playful and exploratory behavior of young children.

III. INTELLECTUAL DEVELOPMENT IN INFANCY

Every normal infant born into the world has the potential for cognitive or intellectual development.

A. Sensory-Motor Activity

1. The senses of touch, vision, taste, smell, and hearing are the resources with which learning begins.

2. As infants gain control of their physical bodies, they also learn through their movements and the manipulation of objects.

3. This sensory-motor activity is the first mode of learning identified by Piaget.

4. In responding to sensory-motor stimulation, babies learn to recognize the characteristics of the situations and things around them.

5. As babies' needs are repeatedly met by their mothers---through feeding, diapering, talking, patting---they learn to associate the sight of their mothers with comfort.

6. Through senses they learn that the terry dog is soft and bumpy, the plastic ball is hard and smooth, and they figure out that the mobile over their tummies will move and jingle when they kick the sides of their cribs.

7. They subject favorite objects to repeated visual scrutinies; they also feel, squeeze, shake, and mouth them.

8. As children perceive, manipulate, and are stimulated by these things in their worlds, they store the experiences in their minds and relate them to each other.

B. Assimilation

1. Knowledge about the world becomes associated with the things they have heard, seen, tasted, smelled, and touched.

2. At first, newborn children hear a bell ring and begin to cry.

3. They are responding only to the sensory impact of the sound.

4. Later, associations they have made in their experiences with bells will influence their responses.

IV. IMPORTANCE OF EARLY SENSORY STIMULATION TO DEVELOPMENT

A. Sensory Stimulation

1. Early infant learning is primarily sensory-motor, and infants who do not have adequate sensory stimulation suffer from this deprivation.

2. They do not establish the brain cell functioning that is necessary for optimum cognitive development.

3. When the necessary network of brain cells is not developed during the first few months of life, the development of higher intellectual functions is slowed.

B. Nutrition

1. We also now know that the provision of adequate nutrition during the last six months of prenatal development and first two years of life is necessary for the physical development of the nerve cells that carry messages from the senses to the brain.

2. Severe malnutrition during these early months may result in the irreversible limiting of intellectual potential.

C. Sensory experiences are basic to learning at all ages.

V. BEGINNINGS OF LANGUAGE AND CONCEPT FORMATION

A. Language and Learning

1. Once children begin to comprehend and use language, they have a tool for thinking and remembering---they do not have to rely on sensory-motor learning alone.

2. Their basic learning is still sensory-motor, but now they can do many interesting things with the experiences that they could not do before.

3. Concept formation begins when children use a word like "dog" to refer to a whole class of animals called "dog" and not just to their own pet.

4. Fruit, vegetable, farm, car, and clothing are examples of class words children explore in the preschool years.

B. Clarifying Concepts

1. Adults can aid children by helping them correct and enrich their concepts.

2. To toddlers all four legged animals may be "doggies" for a while---until adults help them recognize the difference between cows, horses, cats, and dogs, and correctly name each class.

3. Children's concepts are envirched as they have many chances to see, hear, feel, smell, and play with different kinds of dogs.

4. They can learn that "dogs" may be "large," "small," "shaggy," "hairless," "friendly," "cross," etc.

5. The more first-hand sensory experiences children have with dogs, the richer their concepts of "dog" become---the better they are able to cope with dogs and to understand how dogs relate to human beings.

6. They can also talk about dogs and use language to label the characteristics of dogs.

7. Words are the retrieval code to the memory.

8. If you hear the word "dog"---what do you think of? The word triggers a flood of memories of pets known and loved, of frightening or sad experiences, of dog characters and their interesting habits. The longer you think, the more experiences may be retrieved from your memory.

9. Helping children learn to use words helps them remember and recall.

C. Preoperational-Beginning Language Use From Infancy to Around Six Years of Age (Piaget)

1. Children gobble up information about everything they can see, touch, hear, and name.

2. They are establishing relationships between these real things---seeing causes, effects, noting sequences of events and how they evolve, seeing likenesses and differences.

3. In their thinking they cannot, however, move very far beyond their own "self" and the objects and events they have experienced.

4. They cannot move or manipulate things in their minds---they cannot "operate" them mentally (hence, pre-operational). For example, it is an impossibility, to their preoperational minds, that their teacher could be their friend Johnny's mother. She is their teacher, and they cannot think of her in any other relationship.

5. At around age five, children may not be able to count ten blocks, pointing to each one as they count. Yet, if you ask them to think of one block and then two more blocks, and count them "in their heads"---they cannot manage it. Nor can they tell you how many would be left if you took one of the three blocks away. These are mental operations. Their minds cannot manage them until around the age of seven.

D. Importance of Experiences

1. Considerable research shows that the richer children's experiences are with real objects during the early childhood years---with talking about them, recalling them, generalizing, observing, discovering sequences like the seasons of the year, the development of a butterfly, or the making of butter---the better they are able to manage "operations" when they are mentally ready for this type of learning.

2. Piaget and other learning theorists believe that each stage of mental development is important.

3. Rather than try to rush children into learning for which they are not mature enought, it is important to understand each learning period and its implications and to learn how to enrich the child's experiences to take full, rich advantages to the opportunities offered.

VI. GUIDELINES FOR PROMOTING EARLY LEARNING AND CURIOSITY

A. DON'T, in a desire to teach children proper behavior, discourage their natural curiosity by constant reminders such as "Don't touch." "Be careful." "Dirty!" or "Don't ask that!" In the face of too many such admonitions, the children learn that their curiosity and interest in the world is not acceptable and is causing them difficulty. They may give up and become complacent about learning. Learning is a process that takes place within the child. The early learning center is the place where it is more important for the child to learn than it is for the teacher to teach.

B. DON'T provide all the answers yourself. Ask leading questions to help children become interested and make observations themselves by such comments as, "Isn't that interesting?" "I wonder why?" "What do you think?" "What is this?" and "What will happen next?"

C. DO set up a predictable and relaxed environment within which children are safe to do much of their own learning.

D. DO provide enough structure and order that children can begin to understand how things work and why. This helps them begin to look for and appreciate the order and structure in their larger environment.

E. DO provide a wide variety of opportunities for learning at the children's developmental level.

F. DO be enthusiastic about learning and share this enthusiasm with children.

G. DO listen to children and accept their comments and points of view.

H. DO let children know their thoughts and ideas are valued, interesting, and worthwhile.

VII. SUGGESTIONS FOR STIMULATING SENSORY-MOTOR DEVELOPMENT

A. Provide pleasurable touch experiences.

B. Talk with children. Respond to their social overtures.

C. Move the infants about. Get them out of the crib. Think about the infant in a primitive culture going to market on mother's back. How many interesting sights, sounds, smells!

D. Provide rattles, textured toys, mobiles, and balls to be explored. Children like objects with interesting designs and things that move and change.

E. Explore sound-making objects.

F. When toddlers can move on their own, give them things to push, pull, drag, sit on, carry, climb over and through. Give them different sized containers to carry and drop things into. They are exploring space and their relation to it at this age.

VIII. CONSIDERATIONS FOR STIMULATING CONCEPT FORMATION AND THOUGHT

A. Expose young children to experiences involving a wide variety of concepts---food, animals, the family, color, numbers, letters, distance, space, machines, seeds, etc.---by matching the content of the concepts to the child's developmental level.

B. Ask open-ended questions that encourage children to think for themselves---"What is big to you?" "What is big to an elephant?" "What do you know that is shaped like a doughnut?" "How many uses can think of for a hole?" "Are cats and dogs alike?" "Different?"

C. Play puzzle games to help children recall and understand. "I'm thinking of something that grows on a tree. It is red and has black seeds." "How many things can you think of that crawl?" "That jump?" "Where does milk come from?" "Bread?" "What will happen if you put a snowball in the oven?" The children answers and discussion will give you clues to their experiences. You can plan to correct and enrich their concepts.

D. Treat children's questions with respect. Whenever possible give them enough help that they can discover the answers for themselves. Give them materials and encouragement to experiment and find out from their own experiences. Suggest people they can ask. Help them look in books.

CHAPTER XII

TEACHER RESOURCES

INTRODUCTION

Activities for young children must be organized to be effective and require evaluation to determine their effectiveness. Through the use of an activity file card system, the individual teacher can better organize his/her time to meet the individual needs of the children.

When activity plans are written in a uniform fashion and kept in an organized manner, a volunteer, aide, or substitute can become familiar with what is being done and be of assistance to the teacher. In addition, the file cards provide a useful reference for future teaching of young children and provide a resource when the teacher is at a loss for activity ideas.

ESSENTIAL CONTENT INFORMATION

I. SETTING UP THE ACTIVITY CARD FILE

A. Procedures for Developing the File

1. Obtain a 5" x 8" file box and file cards.
2. Divide the file into your chosen curriculum divisions.
3. Develop learning activities for each curriculum division to carry out your yearly and weekly program plans.
4. Keep extra cards available to write up new activities you learn from other teachers and at workshops.

B. Suggested Curriculum Divisions

1. Topical

    a. Art
    b. Body skills
    c. Family
    d. Health
    e. Language
    f. Mathematics
    g. Movement

h. Music
i. Nutrition
j. Safety
k. Science
l. Self-concept
m. Social Science
n. Transitions

2. Developmental

a. Fine motor
b. Gross motor
c. Social
d. Emotional
e. Cognitive
f. Language
g. Appreciation

II. COMPONENTS OF AN ACTIVITY CARD

A. Teacher Developed Activities

The following format would be used for activities which the individual designs or develops after seeing the activity presented by someone else. It should not be used to duplicate information from a resource which the teacher has available for future use.

1. Concept or Skills---A general topic of what will be taught. This is similar to a teacher goal.

2. Activity---The title of the activity

3. Learning Center---Where this activity will typically be done in the classroom or center.

4. Grouping---The size group for which the activity is best suited and/or the age group for which the activity is appropriate.

5. Objective---A statement of the behavior(s) that the child(ren) should be able to perform upon completion of the activity.

6. Materials---A listing of all the items needed for carrying out the activity.

7. Procedures---A sequential listing of all the steps involved in carrying out the activity.

8. Other Concepts or Skills---A list of other concepts or skills (if any) which can be developed by this activity.

9. Other Activities---A list of other activities (if any) which will also teach this concept or skill.

10. Recommendations---(This information should be on the back of the card). A critique of the activity to determine if the objective(s) were accomplished. The recommendations would also include statements useful for future reference about how the activity could be improved, appropriateness for age level, etc.

B. Activities from Resource Books

The following format would be used for activities which can be found detailed in a resource which the teacher possesses or has readily available. It is not necessary to duplicate the information in the resource, but an activity card needs to be written to aid in location of the information.

1. Concept or Skill---A general topic of what will be taught. This is similar to a teacher goal.

2. Activity---The title of the activity

3. Learning Center---Where this activity will typically be done in the classroom or center.

4. Grouping---The size group for which the activity is best suited and/or the age group for which the activity is appropriate.

5. Resource---The title of the resource where the activity is detailed.

6. Page---The page number in the resource where the activity is detailed.

7. Other Concepts or Skills---A list of other concepts or skills (if any) which can be developed by this activity.

8. Other Activities---A list of other activities (if any) which will also teach this concept or skill.

9. Recommendations---(This information should be on the back of the card). A critique of the activity to determine if the objective(s) were accomplished. The recommendations would also include statements useful for future reference about how the activity might be improved, appropriateness for the age level, etc.

III. SAMPLE ACTIVITY CARDS

(See page 113)

IV. RESOURCE UNIT CARDS

A. Definition

A summary of the activities and resources available for teaching a specific concept or theme.

B. Purpose

A resource unit card provides a quick, easy reference for developing weekly and daily plans. It provides an overall picture of an instructional unit.

C. Components of the Resource Unit Card

1. General concept or theme

2. Specific objectives for the children to accomplish to develop an understanding of the theme or concept

3. Titles of specific activities, resources, field trips, etc. that will be utilized in teaching the concept or theme. (Specific activities will be detailed on activity cards and complete plans will be written in the instructional unit).

4. Resources

a. Books, stories, films, pictures
b. Poems, fingerplays
c. Songs, records, rhythms
d. Dramatic play themes
e. Outdoor activities
f. Art activities
g. Field trips
h. Manipulative materials
i. Visitors
j. Cooking experiences
k. Group discussions
l. Other

V. SAMPLE RESOURCE UNIT CARD

(See page 115)

VI. RESOURCE FILE

A. Definition

An organized collection of materials to support the instructional units. The file includes materials which the teacher will utilize in activities with the children. Utilization of specific materials will be detailed on activity cards.

B. Purpose

To provide a convenient method for organizing pictures, flannel stories, etc. for utilization while teaching.

C. Organizing the Resource File - Pictures Section

1. Gather a variety of pictures to support the range of concepts you will be presenting to the children.

2. Cut out, mount, and cover with contact paper.

3. Sort pictures into categories.

4. Label folders and file pictures.

5. Similar folders can be made for flannel stories, patterns, picture cards, etc.

6. Concepts which the picture teaches and questions about the picture which will develop a concept should be written on the back of each picture.

D. Organizing the Resource File - Flannel Stories, Puppet Stories, Etc.

1. Sort stories into categories.

2. Label folders and file stories.

3. Include concepts which the story teaches and questions about the story on the story script.

E. Other Materials

1. Transitions

2. Recipes

3. Bulletin board ideas/materials

4. Songs

F. Organizing the Resource File - Children's Books and Stories

1. Write a book card on any children's book or story you feel will teach the concepts of your program, support the themes, entertain the children, teach language, etc.

2. Each book card should contain the following:

   a. Title
   b. Author
   c. Publisher
   d. Date of publication
   e. Cost (if available)
   f. Summary of content
   g. List of concepts the book or story teaches
   h. Where book is located---center, library, home, etc.

3. Sort cards into categories.

4. Label folders and file cards.

5. Sample book card
(See page 117)

G. Organizing the Resource File---Parent Education Materials

1. Gather a variety of materials which are good teaching aids for parents. These may include pamphlets, flyers, booklets, materials which you make yourself, etc.

2. The materials should be ones which you can obtain free or which may be reproduced for distribution.

3. For each piece of material, attach a card listing the following:

   a. Title of material
   b. Where material can be obtained
   c. Contact person, if applicable
   d. Cost (if any)
   e. Basic Concepts which the material presents
   f. Evaluation of the material

4. Sort materials into categories.

5. Label folders and file materials.

ACTIVITY CARD

The following is a reduced sample of the Activity Card for the trainee to write up activities which he/she learns from others, makes up himself/herself, etc. Specific information regarding the development of the card is presented in the "Teacher Resources" chapter of each curriculum book.

Concept/Skill:	Activity:
Learning Center:	Grouping:
Objective:	
Materials:	
Procedures:	
Other Concepts/Skills:	Other Activities:

ACTIVITY CARD

The following is a reduced sample of the Activity Card for the trainee to write up activities which he/she finds in books and materials which he/she owns or has ready access to in the center. Specific information regarding the development of the card is presented in the "Teacher Resources" chapter of each curriculum book.

Concept/Skill: Learning Center: Resource: Page:	Activity: Grouping:
Other Concepts/Skills:	Other Activities:

RESOURCE OR LEARNING UNIT

THEME/CONCEPT/SKILL:			CURRICULUM AREA:	
Books, Stories, Films	Poems, Fingerplays	Songs, Rhythms, Records	Dramatic Play	Gross Motor

RESOURCE OR LEARNING UNIT

THEME/CONCEPT/SKILL:			CURRICULUM AREA:		
Manipulative Materials	Art Activities	Field Trips	Cooking Experiences	Community Visitors	Other

BOOK CARD

The following is a reduced sample of the Book Card for the trainee to write up children's books which he/she reads and has access to for use with the children. Specific information regarding the development of the card is presented in the "Teacher Resources" chapter of the curriculum book.

Concept/Skill:	Title:
Author:	Publisher:
Cost: (If available)	
Summary or description of the content:	
List of all major concepts which the story will teach:	

122

CHAPTER XIII

PORTFOLIO DEVELOPMENT

As a part of the assessment and credentialing process for the Child Development Associate Credential, the Candidate (trainee) must develop a Portfolio. The Portfolio should contain materials which present a complete and accurate picture of the Candidate's competence in working with three to five year old children in a group setting.

A. REQUIREMENTS

Child Development Associate Consortium guidelines for development of the Portfolio are broad and general. The Portfolio must include (1) a personal profile of the Candidate, of no more than 300 words; (2) thirteen sections, one for each of the functional areas; (3) at least one piece of evidence in each of the thirteen functional areas, accompanied by a written explanation of the reason the evidence is included and the way it demonstrates the Candidate's work with children, and (4) each piece of evidence must be labeled with the functional area.

The Portfolio is not a scrapbook, and pieces of evidence should be selected carefully. Developing the Portfolio should be a learning experience and an outgrowth of the Candidate's training and working with children.

B. OPTIONAL INFORMATION FOR THE PORTFOLIO

The following suggestions for the Portfolio are NOT requirements, but ideas that have proved successful for many candidates during the field test of these materials.

1. Description of the setting, including type of center, information about the children's backgrounds and ages, etc.

2. Beliefs about Early Childhood Education, including a brief discussion of the Candidate's philosophy of early childhood education.

3. For each of the thirteen functional areas, include the following pieces of evidence:
   a. Rationale---a discussion of the reasons the Candidate feels that the functional area is important to a program for young children.
   b. Goals---a listing of the broad goals in the specific functional areas that the Candidate has set for the program and/or the children for the year.
   c. Evidence---two additional pieces of evidence which illustrate the Candidate's competence in each area, including a written explanation for each. (Including these pieces of evidence in the Portfolio will give a minimum of four pieces of evidence for each of the thirteen

functional areas, rather than the one that is required.)

4. Illustrating Evidence---Pieces of evidence may be sketches, photographs, samples, examples, or written descriptions of the activity or item presented. The Candidate would then write a brief explanation showing the ways in which the evidence demonstrates competence in the area and the reason for its being in the Portfolio.

5. Neat and legible---this may be printed, longhand, or typed.

6. Easy to handle---large cumbersome materials and items falling out provide difficulty for each person reviewing the Portfolio. Select a format for the Portfolio and keep it simple and consistent. (Most Candidates have found that a loose leaf notebook or manila folders provide the best format.)

The Portfolio Outline and the Sample Portfolio which follow are designed to provide a guide for trainers and trainees working toward assessment. Through field testing the materials, these guides have proved beneficial to trainees in developing their own individual Portfolios.

PORTFOLIO OUTLINE

I. Entering Materials in the Portfolio

A. Include the title of the functional area and the evidence number in the upper right-hand corner of each piece of evidence.
B. Explain the reason for including the piece of evidence in the specific functional area.
C. Describe how the piece of evidence demonstrates the individual's competence in the functional area.
D. If a piece of evidence pertains to more than one functional area, include it only once, and in the description, note the other area(s) to which it pertains.
E. Mount or index materials in a uniform manner.
F. Be neat and organized.

II. Sample Rationale

Nutrition is vital to the development of preschool children. A knowledge of nutrition is essential for the individuals in a child development center where they are responsible for the health and welfare of each child in the center.

Teachers in a child development center should be committed to the development of the whole child, which means they must develop the ability to plan and prepare nutritious meals and snacks for children. In addition, they must provide experiences in the curriculum to promote good nutrition and mealtime habits in children. Throughout, the teacher must consider the child's developmental level and home environment.

III. Sample Goals

A. Each child will be able to select the foods necessary in a daily balanced diet.
B. Each child will be able to serve many foods for himself/herself.
C. Each child will be able to try new foods prepared in a new way, with a minimum of pursuading.
D. Each child will show a positive increase in physical development.
E. Each child identified as having a nutrition deficiency will be provided with a program to correct the deficiency.

SOCIAL

Definition
Helps the children learn to get along with others and encourages feelings of mutual respect among the children in the group.

Rationale
Describe the importance of the functional area.

Goals
List the goals for the year for the group to accomplish.

Other Pieces of Evidence might be:
Activity Plans---describe the types of activities used for social development and include some plans and descriptions.

Equipment and Materials---describe the types of equipment and materials available for utilization for social development and how they are used; include materials which you feel should be added and why.

Methods---describe the methods used daily for social development; include what methods are implemented; how they are implemented; and why these methods are best for this group of children.

Developmental Progress---describe or include the instruments utilized for recording the developmental progress of children in social development. Include any check lists or measurement tools.

SOCIAL RATIONALE

Social development is one of the major areas of development of humans and comes from the environment, rather than being inherited. Throughout life we are in contact with a variety of people and we must learn to get along with them.

Children go through specific stages in social development and these can't be rushed, but we can provide an environment that encourages positive interaction with others.

An important part of interacting with others is to accept all people as they are. Realizing that we are all alike in some ways and different in some ways. Also, we have to learn to share, not just toys, but time and space also. These things are done daily in the center in an informal way, but I also plan specific activities to teach acceptance and sharing.

SOCIAL GOALS

1. To accept each child in the group as important.
2. To share materials, equipment, space, people, etc.
3. To develop the ability to work/play in different size groups.
4. To recognize that each of us are different in some ways and the same in some ways.
5. To develop basic social skills for functioning in a group.

123

PEOPLE PICTURES

Because Candyland CDC is in a military community, many of the children are from families that travel to many places and to many countries. These children feel insecure sometimes about the new places because they have no friends there. To help with this, we talk about people from other countries and places in as many units as possible.

In my picture file, I have pictures of children from other countries. One activity we do is to talk about the native costumes of other countries and then talk about what parts are worn most of the time. We only talk about a few at a time. If we know a child is moving to a particular place, we find lots of pictures for that place and talk about them. We all get involved in the child's moving. This also helps the children learn about friends' moving and still be friends.

SOCIAL ENVIRONMENT

Each activity center has a rules chart which shows how many people can be in the area at one time. This helps the children see that groups can share the materials. On some of the manipulative shelves and materials we have pictures of the number who can use the materials at once. When a toy is marked with two children, and a child won't share, then we talk about the pictures and figure out how two can use it.

I, also, have two quiet spaces where children can go to be alone. This is needed because we can't always interact with others. Sometimes I even suggest that a child go to one of these areas when I see he is having trouble interacting.

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